

HFS16CTDLM - Credit Transfer Application – BSB50420-Diploma of Leadership and Management

SECTION 1 – Personal Details

Title	Given Names	Surname
Address		
Email		
Daytime telephone or mobile		
Applicant / Student ID number (where known)		

SECTION 2 – Self Assessment (BSB50420)

UNIT CODE	UNIT TITLE	Credit Transfer Applicable	RTO Details	OFFICE USE ONLY
			Please detail the RTO name, RTO number, CRICOS number	CT Approved (Y/N)
BSBCMM511	Communicate with influence	<input type="checkbox"/>		
BSBCRT511	Develop critical thinking in others	<input type="checkbox"/>		
BSBLDR523	Lead and manage effective workplace relationships	<input type="checkbox"/>		
BSBOPS502	Manage business operational plans	<input type="checkbox"/>		
BSBPEF502	Develop and use emotional intelligence	<input type="checkbox"/>		
BSBTWK502	Manage team effectiveness	<input type="checkbox"/>		
BSBFIN501	Manage budgets and financial plans	<input type="checkbox"/>		
BSBLDR522	Manage people performance	<input type="checkbox"/>		

BSBOPS504	Manage business risk	<input type="checkbox"/>		
BSBSTR502	Facilitate continuous improvement	<input type="checkbox"/>		
BSBTWK503	Manage meetings	<input type="checkbox"/>		
BSBWHS521	Ensure a safe workplace for a work area	<input type="checkbox"/>		

SECTION 3 - Self Checklist

Have you attached certified copies of your Certificates and Statement of Attainment (or Academic Transcript) with this application?

YES NO (please attach all relevant documentation)

SECTION 4 – Privacy Statement, Declaration and Signature

Student Declaration

- I declare that, to the best of my knowledge, the information supplied in this application form and any in supporting documents submitted with this application is correct and complete.
- I understand that Hilton Academy may terminate my enrolment if I have misrepresented or failed to fully and completely state my academic record at each other tertiary institution attended by me, and that this termination may take place at any stage during the course I undertake.
- I understand that Hilton Academy may contact other institutions attended by me to verify the information provided which pertains to my enrolment at that institution, and to seek other relevant information about me.
- I understand that I must attend all enrolled classes until I receive notification of the outcome of this application for credit or exemption.

Signature		Date	
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