

Credit Application Form

Applicant Name						
Address						
Email			ı	Mobile/Telephone		
MIA Student ID (if alr	eady enrolled)					
Name of course	_					
Please list relevant quali (Where you have comple				separately)		
Issuing RTO Name	Course/un	it code	Course/unit	name	Certified	d copy attached
					Yes	☐ No
					Yes	☐ No
					☐ Yes	☐ No
No of pages attached]				
Student Declaration						
 I declare that, to the best with this application is corr I understand that Melboustate my academic record acourse I undertake. I understand that Melboupertains to my enrolment acounderstand that I must acounterstand that I m	ect and complete. Irne Institute of Austrate each other tertiary Irne Institute of Austrate that institution, and	ralia may terminate institution attended alia may contact otl to seek other releva	my enrolment if I by me, and that th her institutions att ant information abo	have misrepresented his termination may t ended by me to verif but me.	d or failed t ake place a y the inform	o fully and completely at any stage during the mation provided which
Student Signature				Date		

Please submit this form to Student Services Officer in campus or email to studentservices@mia.edu.au



Credit Application Form

Office Use only	
Processed by	
Signature	
Date	
Notes :	