Learner Qualification Transfer & Deferral and Center Transfer Application Form

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| --- | --- | --- | --- | --- | --- |
| **Learner Name** | |  | | | |
| **Unique Learner Number** | |  | | | |
| **E-Mail** |  | | **Mobile Number** |  | |
| **Registered Centre Name** | |  | | | |
| **Registered Qualification Title** | |  | | | |
| Explain the ground of application as applicable | | | | | |
| **Qualification Transfer** | |  | | | |
| **Qualification Deferral** | |  | | | |
| **Center Transfer** | |  | | | |
| Declaration  I have read and Understood the B-TIC Qualification Transfer & B-TIC Qualification Deferral policy, B-TIC admission policy, B-TIC Centre Transfer Policy, B-TIC Prior Learning Assessment Policy, and other relevant policies.  I authorize B-TIC to verify my application from relevant parties  I understand that B-TIC reserves the right to reverse and alter any academic decisions  I understand that B-TIC collects, stores, and uses personal information in accordance with B-TIC Data Protection Policy.  The information contains in this application is correct, true and complete to the best of my knowledge | | | | | |
| Learner Signature | | | | | Date |
|  | | | | |  |

**OFFICE USE ONLY)**

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| --- | --- | --- | --- | --- | --- |
| Decision of application |  | | | | |
| Assigned officer |  | | | | |
| **Application Received Date:** |  | **Signed off Date** | |  | |
| Signature of Assigned officer |  | | **Date** | |  |

Note:- The process will take 10 working days