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** |  |
| DeclarationI 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