



Faculty of Engineering
Department of Electrical and Electronic Engineering

**COURSEWORK POSTGRADUATES
APPLICATION FOR CREDIT FORM**

Please Return Form to:
David Strover
Room 3.22a
3rd Floor
Dept of Electrical and Electronic Engineering
Building 193
The University of Melbourne
Phone: 8344 6925

STUDENT DETAILS			
Name:		Student Number:	
Address:			
Home Phone:		Daytime Phone/Mobile:	
Name of Course:			

Credit refers to the waiving of a particular subject on the basis of a student having completed an equivalent subject in an award course. Credits do shorten the length of the course.

SUBJECT(S) FOR WHICH CREDIT IS BEING SOUGHT	
Subject Number	Subject Name

EQUIVALENT PREVIOUS STUDIES RELEVANT TO REQUEST	
University	Subject Number and Name

SUPPORTING DOCUMENTATION
I have attached to this application:
<input type="checkbox"/> Course information about the relevant equivalent previous subjects
<input type="checkbox"/> All relevant academic transcripts
<input type="checkbox"/> A supporting statement
<input type="checkbox"/> Evidence of relevant work experience

STUDENT SIGNATURE	
Student Signature:	Date:

COURSE ADVISOR'S RECOMMENDATION	
Is the student's request supported?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Comments:	
Is an interview with, or further information from, the student required?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Comments:	
Course Advisor's Signature:	Date:

Department Office Use Only:		
<input type="checkbox"/> Student interview not required		
<input type="checkbox"/> Student interview / further information arranged	Date:	Time:
Student interview held and application supported?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Faculty Office Use Only:		
<input type="checkbox"/> Entered on Merlin		
Administrative Signature:		Date: