## UC Global Learning Office – Course Credit Transfer Agreement (CCTA)

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| CCTA Version | Choose an item. | Date |  |
| Section A – Student Information – All fields must be filled in by applicant (student) |
| Student Name | Enter your full name | UC Student ID Number | Enter your UC Student ID |
| UC Course | Enter the course you are studying at UC | UC Course Convenor | Enter the name of your Course Convenor |
| Name of host university | Enter the name of the host university you are proposing to study at |
| Which UC study period will your international experience occur in? | [ ]  Semester 1 [ ]  Semester 2 [ ]  Winter Term [ ]  Summer Term |
| Section B – Units – To be filled in by the applicant (student) |
| Host University Units | **University of Canberra Units** |
| Subjects I propose to study at my host university | Subjects I will seek credit transfer for at UC |
| *All unit fields below must be filled in – particularly the Level for your UC units* |
| Subject Code | Subject Name | Credit Points | Level |  | Subject code | Subject name | Credit points | Level |
| Subject Code | Enter Subject name at Host University | Credit points | Level |  | Subject Code | Enter Subject name at University of Canberra | Credit points | Level |
| Subject Code | Enter Subject name at Host University | Credit points | Level |  | Subject Code | Enter Subject name at University of Canberra | Credit points | Level |
| Subject Code | Enter Subject name at Host University | Credit points | Level |  | Subject Code | Enter Subject name at University of Canberra | Credit points | Level |
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| Subject Code | Enter Subject name at Host University | Credit points | Level |  | Subject Code | Enter Subject name at University of Canberra | Credit points | Level |

Once you have filled out the details above you will then need to 1) Email your Faculty CCTA contact with a copy of the relevant unit outlines or syllabus from the host university that you intend to study at 2) Print this agreement 2) Sign the agreement 3) Take the agreement to your Faculty Approver / Program Director to sign

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| Section C – Student Signature |
| By signing below, you are also agreeing to the following statement: I understand that I must inform the exchange student coordinator if I require any alterations to this agreement. I understand that syllabus must be provided before changes are approved. | **Signature** |  | **Date** |  |
| Section D – UC Course Convenor Signature  |
| Faculty Approver / Program Director Name |  | **Signature**  |  | **Date** |  |
| *If your double degree is relevant to two faculties, you must have both faculties approved with signatures* |
| Faculty Approver / Program Director Name |  | **Signature**  |  | **Date** |  |