



1. CANDIDATURE DETAILS

Family Name:	Given Names:	Student ID:
Course (eg Master of Medical Education):		Course Code:

2. PRIOR LEARNING (Please complete section A or B)

A) Completed unit(s) of study:

i) Please list the unit(s) of study you have previously completed which covers material relevant to your course.

Unit of Study Code:	Unit of Study Name:	Credit Points:	Year/ Semester:	Institution:

Please note, you will need to provide unit of study outlines and relevant certified transcripts for each unit.

ii) Have you used the unit(s) listed above to obtain a previous qualification? No Yes (please detail)

Name of Qualification: _____

iii) Do you intend to use the unit(s) listed above to obtain a qualification other than that listed in section 1?

No* Yes (please detail)

Name of Qualification: _____

B) Prior Work Experience: I wish to apply for advanced standing based on prior work experience.

If you are requesting advanced standing for prior work experience, please attach details to this form. Please note you will need to supply evidence of having covered the entire content of a unit of study to a satisfactory standard. Refer to the information on how to complete this form for specific details.

2. REQUEST

This request is for a **Waiver** from a unit of study within your current course (please list the relevant unit below). For coursework degrees, this means you must study the equivalent credit points by selecting another unit of study approved by your course.

ii) Please list the University of Sydney unit of study for which you are seeking a waiver.

Unit of study code:	Unit of study name:	Credit points:
<input type="text"/>	<input type="text"/>	<input type="text"/>

3. DOCUMENTATION AND DECLARATION

Original or certified transcript with relevant unit(s) of study and results or evidence of having covered the entire course content of a unit if study through prior work experience is provided with this form.

Course outlines (if section A i has been completed) are provided with this form.

Evidence of the current status of the course in which the unit(s) was undertaken (where applicable*) is provided with this form.

I have previously been granted _____ credit points of credit toward this degree.

The information I, _____ have provided on this form is correct to the best of my knowledge at this time and should I learn that it is incorrect I will notify the Postgraduate Student Administration Unit immediately.

Student Signature: Date:



Family Name:	Given Names:	Student ID:
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4. APPROVALS

Unit of Study Coordinator: Approve request Reject request

(Specific credit and waivers only)

Comments:

Name:

Signature:

Date:

Course Coordinator:

Approve request Reject request

Comments:

Name:

Signature:

Date:

→ PLEASE FORWARD TO The Postgraduate Student Administration Unit – Edward Ford Bldg (A27)

Chair of the Board of Postgraduate Studies: Approve request Reject request

(Specific credit and non specific credit only)

Comments:

Name:

Signature:

Date: