



Bush Tukka Pty Ltd-- T/A--Adelaide Culinary institute(ACI) -- Adelaide Construction institute (ACI)

Application for student transfer between providers

Applicant Details:

Family Name:							Title:	
First Given Name:								
Second Given Name:								
Preferred Name:								
Gender:	□ Male □ Fen		l Female	Birth Date:				
Home Number:				Mobile Number:		nber:		
Home address:								
Transfer details (Existing Provider):								
Institute requesting transfer from:								
Program requesting transfer from:								
Date of requested release:						Date of new commencement:		
Institute contact details:		Phone:			Delegate:			
Application:		☐ Approved				Not appro	ved	
Signature:						Date:		
Reasons for decision:	•							

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Administrative Check:	 □ Application for transfer approved by CEO/Delegated Officer □ RTO Data checked for student attendance and fees pro-rated □ Charges determined and quick posted to student account □ Student file audited and copied before transfer □ PRISMS updated 							
Transfer details (Gaining Provider):								
Institute requesting transfer to:								
Program requesting transfer to:								
Date of requested commencement:		Place available?						
Institute contact details:	Phone:	Delegate name:						
Application:	☐ Approved ☐ Not approved							
Signature:		Date:						
Reasons for decision:								
Administrative Check:	☐ Application for transfer approved by CEO/Delegated Officer ☐ Student fees received ☐ Student file audited received ☐ PRISMS updated ☐ If "not approved" has the student been advised in writing							

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