



Oakswood College

Empowering Through Education



Student Transfer

Request Form

PROMOTING EXCELLENCE • ENSURING COMPLIANCE
SUPPORTING OUR COMMUNITY



GOVERNANCE



QUALITY



COMPLIANCE



EXCELLENCE

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Oakwood College
Empowering Through Education
(Trading name of Oakwood Group Ltd)

Student Transfer Request Form
Appendix A: Student Transfer Policy & Procedure
(For Oakwood College Students Only)

This form should be used by relevant College staff to record, assess, and approve all internal and external student transfer requests.

Queries regarding this form, or the Student Transfer Policy & Procedure, should be addressed to the Head of Quality Assurance & Information Systems.

A. Student Details

Student Full Name:	
Student ID:	
College Email Address:	
Contact Number:	
Current Programme / Course:	
Current Level of Study:	
Current Mode of Study:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time
Programme Awarding Body:	<input type="checkbox"/> BNU <input type="checkbox"/> ATHE <input type="checkbox"/> Other:

B. Transfer Request Details

Type of Transfer Requested:	
• Internal transfer (course)	<input type="checkbox"/>
• Internal transfer (mode of study)	<input type="checkbox"/>
• External transfer into Oakwood College	<input type="checkbox"/>
• External transfer out of Oakwood College	<input type="checkbox"/>
Current Provider (if external):	
Target Provider / Institution:	
Target Course / Programme:	
Target Level:	
Proposed Start Date / Intake:	

C. Academic Background

Credits Achieved to Date:	
Modules Successfully Completed:	
Transcript / Evidence of Credit Requested:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Transcript Received / Attached:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Recognition of Prior Learning (RPL) Required:	<input type="checkbox"/> Yes <input type="checkbox"/> No

D. Student Reasons for Transfer

Part 1: Please summarise the reasons for the requested transfer in the box below, then proceed to complete Part 2 of Section D:



Part 2: Relevant factors discussed:

Academic progression	<input type="checkbox"/>
Mode of study change	<input type="checkbox"/>
Personal circumstances	<input type="checkbox"/>
Financial reasons	<input type="checkbox"/>
Well-being/support needs	<input type="checkbox"/>
Career progression	<input type="checkbox"/>
Relocation	<input type="checkbox"/>
Other:	<input type="checkbox"/>

E. Student Support and Individual Circumstances

- Disclosed support needs / reasonable adjustments:

- Any disability, health, or personal circumstances relevant to success:

On the basis of the information in the boxes above, please confirm if this indicates any widening participation consideration and/or additional support requirements for the transfer:

Widening participation considerations:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Additional support required during transition:	<input type="checkbox"/> Yes	<input type="checkbox"/> No

F. Financial and Regulatory Checks

Fee implications explained to the student:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Student Loans Company/sponsor implications discussed:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Refund/compensation implications explained:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Awarding body approval required:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Awarding body approval obtained:	<input type="checkbox"/> Yes	<input type="checkbox"/> No

G. Assessment and Decision

1. Assessment Summary

Entry requirements met	<input type="checkbox"/>
Academic suitability confirmed	<input type="checkbox"/>
Timing of the transfer feasible	<input type="checkbox"/>
Late transfer catch-up support considered	<input type="checkbox"/>
Support plan in place	<input type="checkbox"/>
Student's best interests confirmed	<input type="checkbox"/>

2. Final Decision Outcome

Approved	<input type="checkbox"/>
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Approved with conditions	<input type="checkbox"/>
Deferred to next intake	<input type="checkbox"/>
Declined	<input type="checkbox"/>

3. Conditions/rationale for decision:

H. Authorisation and Record

Reviewed by Programme Lead:		Date:	
Reviewed by Head of Academic Affairs / Admissions:		Date:	
Head of Operations / Registry Approval (if required):		Date:	
Student notified in writing:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Student record updated:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Transcript issued/shared:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

I. Document Control

This completed appendix form must be retained on the student record in accordance with the College’s Data Protection Policy and student records management protocols, and may be reviewed as part of academic quality assurance, OfS compliance monitoring, and student complaints investigations.