



University of South Alabama College of Arts and Sciences
MODIFICATION OF TRANSFER CREDIT

Student Name: _____ Student J-number: J00 _____

I have attached student's USA academic transcript from PAWS to the request.

Name of Student's Advisor (typed)

Student's Advisor (signature)

Date

Department Chair/Program Director (signature)

Date

REVIEWED:

DECISION: _____

Dean (signature)

Date
