



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

Student Name: _____ Student J-number: J00
First Name Middle Initial Last Name

Major(s)/Concentration(s): _____ Minor(s): _____

******This form MUST be typed. One modification request per form.******

STEP 1:

Name of Institution _____

Original Institution's Information (if available)

Subject	Course No.	Title

STEP 2:

Current USA Transcript Information (REQUIRED)
 Attach student's USA academic transcript from PAWS.

Subject	Course No.	Title

STEP 3:

Proposed USA Transcript Modification (REQUIRED):

Subject	Course No.	Title
