The University of Alabama
Graduate School
EVALUATION OF GRADUATE CREDIT EARNED AT ANOTHER INSTITUTION

Only those credits applicable to the student's degree objective are acceptable for transfer

Name of Student:_____ CWID:_____ Major:_____ Degree Sought:_____

Name of Institution from which course work was completed	Course Number and Name as shown on transcript	Date Credit was Earned (semester and year)	Semester Hours approved to apply to above Degree	University of Alabama Equivalent Course Number and Name

Recommended for approval _____ Approved by _____ Date _____
(Chairperson of Student's Committee) (Head of Major Area of Study)

Approved _____ Date _____
(Dean of the Graduate School)

- ☐ Graduate School
- ☐ Department or Division
- ☐ Student
- ☐ Office of University Registrar

The Graduate School, 102 Rose Administration Building, Box 870118, Tuscaloosa, AL 35487, Tel 205-348-5921, Fax 205-348-0400

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