



CREDIT BY EXAMINATION

University of South Alabama

Processing Credit By Examination

NOTE: USA students may receive credit by special examination upon approval of the appropriate academic personnel. A fee of \$30.00 will be charged for each examination. In addition, the student will be charged the current course fee per hour of credit. Hours attempted will be included in determining the student's grade-point average.

1. After getting instructor's approval, student obtains Credit by Examination form from Forms area of the Registrar's Office website (<http://southalabama.edu/departments/eforms/registrar>)
2. Student completes top portion of form and takes to Chairperson of the course's department for signature.
3. Chairperson completes his/her portion and student takes to the Dean of the course's College office for signature.
4. Upon completion of Dean of the College signature, student takes to the Student Accounting office for payment.
5. Student Accounting office staff member completes their portion of the form. Student takes form to the instructor of class to be tested.
6. After exam, instructor completes his/her portion of form and forwards it to the **Registrar's Office**.
7. Registrar's Office staff member will update student's academic record. Student will be notified of updated academic record via their USA e-mail address.



CREDIT BY EXAMINATION

University of South Alabama

TO BE COMPLETED BY THE STUDENT

Date: _____ Student Number: J00 _____

Last Name: _____ First Name: _____ Middle Name: _____

Course For Which Credit Is Desired

Course Subject: _____ Course Number: _____ Credit Hours: _____

Term in which examination is to be taken: _____

Student's Signature: _____

TO BE COMPLETED BY THE CHAIRPERSON OF THE DEPARTMENT

Date: _____ Faculty Member Supervising Exam: _____

Date Exam Will Be Administered: _____

Signature of Department Chairperson: _____

TO BE COMPLETED BY THE DEAN OF THE COLLEGE

Date: _____ Request Approved Request Denied

Signature of Dean of the College: _____

TO BE COMPLETED BY STUDENT ACCOUNTING

Course Fee Paid: _____ Exam Fee Paid: _____ Total Paid: _____

Date: _____ Receipt Number: _____

Signature of Student Accounting Staff: _____

TO BE COMPLETED BY THE INSTRUCTOR

Department and Course Number: _____ Credit Hours: _____ Grade: _____

Signature of Instructor: _____ Date: _____

TO BE COMPLETED BY THE REGISTRAR'S OFFICE

Date received by Registrar's Office: _____ Signature of Staff Member: _____

Updated in Banner: _____ Notification to Student: _____ Filed/Scanned in Student's Folder: _____