

The United States Sports Academy

One Academy Drive
Daphne, Alabama 36526
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Fax: (251) 625-1035
<http://www.ussa.edu>
E-Mail: registrar@ussa.edu



Doctoral Cognate Courses (Pre-Approval) Form

Student's Name: _____

Social Security or Student ID#: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: (_____) _____

Intended Term of Enrollment Fall Spring Summer _____
(year)

Area of Specialization: Human Resources Leadership Marketing

Intended College of Enrollment: _____

Address: _____

Other institution: Course Number and Title	Credit Hours	USSA Course Equivalent

*** USSA will accept transfer credit from other regionally accredited institutions, as long as a grade of B or better is earned. *A catalog course description and course syllabus must accompany this form in order to process the request for cognate course(s).*

*** Upon completion of these courses, please have your official transcript mailed to:

United States Sports Academy
Graduate Admissions
One Academy Drive
Daphne, Alabama 36526

Dean of Academic Affairs or Designee

Date