

Official Use Only

Date Rec: _____

Date Proc: _____

By: _____

The United States Sports Academy

One Academy Drive
Daphne, Alabama 36526

Phone: (251) 626-3303

Fax: (251) 625-1035

<http://www.ussa.edu>

E-Mail: registrar@ussa.edu



STUDENT INFORMATION CHANGE FORM (Academic)

Student Name (as it appears on the Academy's records): _____

Social Security or Student ID #: _____

Degree Level: _____

Student Advisor: _____

COMPLETE ONLY APPLICABLE INFORMATION

Major Change

Change Major from: _____

Change Major to: _____

Emphasis Change

Change Emphasis from: _____

Change Emphasis to: _____

Specialization Change

Change Specialization from: _____

Change Specialization to: _____

Signature: _____ Date Submitted: _____