



America's Sports University®

## CHANGE OF CATALOG REQUEST FORM

Although the Academy reserves the right to change policies and procedures and the student acknowledges this right by registering for a course, the Academy recognizes a student's need to know graduation requirements and associated policies. The catalog that sets out a student's degree requirements will be based on the term in which he/she first registers for courses; it is not based on the date of acceptance. Students entering under one catalog will be expected to graduate under the guidelines of that catalog, unless they stop-out for a year. If a student stops-out for a year, they must re-enroll under the current academic catalog.

If, however, for whatever reason a student wishes to change catalogs, this can be done through the Dean of Student Services by using this Change of Catalog request form.

If a student changes catalogs, the student is responsible for all the graduation requirements in the new catalog. A student may change catalogs only once during his/her academic program. The Academy reserves the right to deny a student's catalog change request upon review.

Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Email Address: \_\_\_\_\_

Last Four Digits of Social Security Number OR Student ID Number \_\_\_\_\_

Program (select one): Bachelor's \_\_\_\_\_ Master's \_\_\_\_\_ Doctoral \_\_\_\_\_

I \_\_\_\_\_ officially request to change to the \_\_\_\_\_ (academic year) catalog.  
(Print Student's Name)

After review of my request, I understand that I will be notified via my Academy e-mail account. I understand that when my request is approved I must contact my academic advisor to discuss which courses I need to enroll in to complete my degree requirements. I understand that I am responsible for all graduation requirements in this new catalog.

Student Signature: \_\_\_\_\_

Send completed form to: [studentservices@ussa.edu](mailto:studentservices@ussa.edu) or fax to: 251-626-1035.  
To be processed by Division of Student Services:

Date Received: \_\_\_\_\_  
Approved \_\_\_\_\_ Denied \_\_\_\_\_

If denied, reason for denial: \_\_\_\_\_

Signature of Registrar: \_\_\_\_\_