

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



Graduate Transfer Credit Evaluation Fee Form

Student's Name: _____

Address: _____

Phone Number: (____) _____ **Email:** _____

Intended Term of Enrollment **Fall** **Spring** **Summer Year** _____

| Other institution: Course Number and Title | Credit Hours | Academy Course Equivalent |
|--|--------------|---------------------------|
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***** The Academy may accept transfer credit from other accredited institutions, as long as a grade of B or better is earned.**

***** Please have official transcripts, course syllabi and course descriptions for the courses that you would like to transfer mailed to:**

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

Method of Payment: I understand that my credit card will be charged \$50 to cover the required transfer evaluation fee.

Credit Card Type: VISA MC DISCOVER

Credit Card Number: _____ - _____ - _____ - _____

Expiration Date: _____ - _____

CVV Code _____

Billing Zip Code _____

Approved By:

Dean of Academic Affairs or Designee

Date