



ACE Program Approval Form

Please print legibly

Name (Last, First)	
Street Address	
City	
State	
Zip Code	
Home Phone	
E-Mail Address	
High School (include campus- East or West)	
Application ID # (if known)	
Date of Birth	

Identify your ACE course

If you are taking more than one ACE class please print, complete and submit a separate form for each class.

Class Name _____ Class Period _____

Teacher's Name (printed) _____ Teacher's Signature _____

Submitting this form (Note: this form is NOT the application)

You can submit this completed form:

- Online at enroll@stonybrook.edu/apply
- By email to highschoolprograms@stonybrook.edu
- Or by mail to: ACE Program Coordinator
Undergraduate Admissions
118 Administration Building
Stony Brook, New York 11794-1901

Note: Your teacher may wish to collect the forms from the entire class and submit them together.

**** You will be sent an email with your Stony Brook ID number and instructions for logging into Stony Brook's SOLAR system. Please save this information as you will need it in order to access your record and request a transcript from the Registrar's Office at the end of the year**

____ I have discussed my enrollment in the ACE Program with my parent(s)/guardian. I understand that the ACE Program course(s) at Stony Brook University are credit-bearing, college-level courses being taught in my high school and that my grade(s) will become a part of my permanent academic record at Stony Brook University. I understand that I must complete the online ACE Program Application and mail in the non-refundable \$300 per course ACE program fee with this form.

Signature of Applicant: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____