



University of Nebraska-Lincoln
Undergraduate Education
221 Seaton Hall
Lincoln, NE 68588-0683
(402) 472-6023
<http://ace.unl.edu>

Completion Form for ACE Certification of Co-Curricular Experience

Definition: This form is completed and signed by the UNL Faculty Sponsor, the Department/Unit head, by the Associate Dean (or designee), and the student then sent to Registration & Records to complete the ACE approval for co-curricular academic experience request. The [Pre-Experience Approval Form for ACE Certification for Co-Curricular Experience](#) document may have been completed if request was pre-approved.

Student's name: _____		NU ID: _____	
Last	First	M.I.	
Email address: _____		Phone: _____	
Primary College: _____		Primary Major: _____	
Bulletin Year: _____			

UNL Faculty Sponsor information (please print):			
Name: _____			
College: _____		Department: _____	
Address/Office: _____			
Phone: _____		Email: _____	

Specify course being used for credit (if applicable): _____			
	Department	Course No.	Title
Credit hours: _____			
ACE Learning Outcome Proposed to be satisfied by this co-curricular experience:			
<input type="checkbox"/> ACE 1 <input type="checkbox"/> ACE 2 <input type="checkbox"/> ACE 3 <input type="checkbox"/> ACE 4 <input type="checkbox"/> ACE 5 <input type="checkbox"/> ACE 6 <input type="checkbox"/> ACE 7 <input type="checkbox"/> ACE 8 <input type="checkbox"/> ACE 9 <input type="checkbox"/> ACE 10			
Number of credit hour equivalents being requested (if not using a credit-bearing course for outcome): _____			
Number of contact hours involved in the Co-Curricular Experience: _____			
Note: A minimum of 15 contact hours of co-curricular activity are required for each credit hour equivalent being requested, according to the ACE Governing Document 4, part V.			

Continues on next page

Documentation required:

1. Portfolio that represents student work demonstrating achievement toward the outcome for which certification is requested.
2. 1-2 page narrative written by the student explaining how the work helped him/her achieve the ACE outcome.

Signatures on this form indicate:

1. UNL Faculty Sponsor and Associate Dean (or designee) have reviewed the portfolio of work and the narrative from the student requesting certification and verify that the work adequately demonstrates achievement toward the outcome for which certification is requested according to the Guidelines for Review of ACE Courses (<http://www.unl.edu/ous/ace/ACEguidelines.shtml>).
2. If the co-curricular experience is not taken for a credit-bearing (3 credit hours minimum) course, the faculty sponsor and associate dean (or designee) verify that the student completed work comparable to that required for a 3 credit hour course.

Signatures:

Student: _____ Date: _____

UNL Faculty Sponsor: _____ Date: _____

Unit Chair/Head: _____ Date: _____

Associate Dean: _____ Date: _____
(or designee)

Note: The accompanying documentation should be reviewed by the UNL Faculty Sponsor and Unit chair/head. The Associate Dean (or designee) of the student's home college should sign this form. The UNL Faculty Sponsor and college Associate Dean (or designee) should keep a copy of the completed form.

- **A copy of this completed form and the documentation of the student work (including the portfolio and student narrative) should be sent to the ACE office in Undergraduate Education (220 Seaton Hall) for assessment purposes of the ACE outcome being requested.**
- **The original copy of this form should be sent to the Degree Audit Systems Coordinator in the University Registrar's office so that the experience is correctly added to the student's Degree Audit for the ACE outcome specified.**