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:
☐ ACE 1  ☐ ACE 2  ☐ ACE 3  ☐ ACE 4  ☐ ACE 5  ☐ ACE 6  ☐ ACE 7  ☐ ACE 8  ☐ ACE 9  ☐ 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.

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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: ___________________________________________ (or designee) Date: ______________________

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.