



## **ACE Program Acceptance Form**

Student Name (First and Last): \_\_\_\_\_

Student Non-FGCU E-Mail Address: \_\_\_\_\_

Student Cell Phone Number: \_\_\_\_\_

Student t-shirt size: \_\_\_\_\_

\*Parent/Guardian Name: \_\_\_\_\_

\*Parent/Guardian E-mail Address: \_\_\_\_\_

Parent/Guardian Cell Phone Number: \_\_\_\_\_

\*We will use this parent/guardian contact information as our primary parent contact for program and University information, if needed.

Select One:

By checking this box, I officially ACCEPT my admission to the Florida Gulf Coast University Accelerated Collegiate Experience (ACE) Program for the 2023-2024 academic year. I also acknowledge and understand that I must complete all Program Enrollment Steps by June 30, 2023 in order to participate in the ACE Program for the 2023-2024 academic year.

By checking this box, I respectfully DECLINE my admission to the Florida Gulf Coast University Accelerated Collegiate Experience (ACE) Program for the 2023-2024 academic year.