

ACCESS TO COLLEGE EDUCATION (A.C.E.) COMMITMENT

PARENTS: RETURN ONLY THE LAST PAGE TO YOUR LIAISON

Please **KEEP** the **TOP PAGE** for **YOUR Files**

This agreement outlines the requirements for participation in Access to College Education (A.C.E.) The ACE program is a partnership between **ACE families**, several **School Districts** (*spread throughout Cortland, Madison, Onondaga, Seneca and Tompkins Counties*), and **four participating local colleges** (*Cornell University, SUNY Cortland, Ithaca College and Tompkins Cortland Community College*). It provides the student with a variety of *college related experiences* in preparation for post secondary education. The more events students attend, the more they benefit. The majority of ACE events also include *parental* participation.

The expectations outlined below must be met by each party participating in this agreement:

A. THE STUDENT WILL:

1. In eighth grade, review the program with his/her parent(s) or guardian(s) and sign the contract indicating **intent to participate in the A.C.E. program.**
2. Enroll in and *complete* his/her school district's *college preparatory program.*
3. Earn a high school diploma having minimally maintained a **B average** at the end of **each** year of high school.
4. **PARTICIPATE in at least 4 A.C.E. events per school year - for a total of 12.**
The event calendar year is September through August. Students may do more than 4 per year. (If 4 events per year are done in 9th, 10th, and 11th, students will have 12 by the end of 11th grade.

~**These 12 events must consist of at least 8 "Required" Events** coming from *among* any of the following:

Regional Institutes: *Short workshop programs;* **Campus Visits:** *School field trips ;* **Campus Events w/parent(s):** *Grade Specific: Welcome;* and/or **any** of the **ACE Summer Programs**

Note: *Students and parents are encouraged, to attend several Regional Institutes over time.*

~**The remaining 4 "Elective" Events** may be selected from **ANY combination of ACE events** including **any extra from the 'required' events and/or:** *College Theatre; Gallery Talk & Tours; etc.*

5. After consulting with parent/guardian, **notify** the local A.C.E. liaison if wishing to ***withdraw*** from the A.C.E. program.

NOTE: **Upon successful completion of at least 12 events** (*with at least 8 coming from the 'required' group*) **and a B average the student will receive the ACE Recommendation letter.**

B. THE A.C.E. COLLEGIATE INSTITUTIONS WILL:

1. Work with selected school districts to provide participating high school students with academic advisement, skills development and motivational activities.
2. Provide information on financial assistance at various ACE programs.
3. Provide summer and other enrichment programs for participating high school students.

C. THE A.C.E. PARTICIPATING SCHOOL DISTRICTS WILL:

1. Appoint a district *liaison* for the A.C.E. program.
2. Identify and register students for the A.C.E. program.
3. Provide needed support programs to enable student to meet A.C.E. academic requirements.
4. Cooperate with the A.C.E. institutions in the development of mentoring activities which will assist students in fulfilling A.C.E. expectations.
5. Provide needed academic guidance and counseling services.
6. Initiate discussion of the A.C.E. program with parents and students on an on-going basis.
7. Maintain files, including a copy of this agreement, and appropriate related records to be retained by the individual local school districts.

D. THE PARENT/GUARDIAN WILL:

1. **Provide** on-going *support and encouragement* for the student to meet the responsibilities of the A.C.E. program:
 - ~ attending an **average of four** or more events **per year**
 - ~ maintaining a **B average** overall.
2. **Consult** periodically with school officials to *maintain* the student's academic progress or changes in academic goals.
3. **Be responsible** for helping the student **ATTEND** A.C.E. events. *Remember, activities will include school provided field trips, as well as events where parent/guardian involvement is needed and expected.* The majority of ACE events are for *both* students *AND* parents. You will also be responsible for picking up the student at A.C.E. events when ill or if he/she fails to follow the rules or directions of the chaperon.
4. **Acknowledge** the student's intention should he/she wish to *withdraw* from the A.C.E. program.

PARENTS:

Please **KEEP** all but the bottom page/form for your records.

To Join ACE, Please **FILL** out, **SIGN** and **RETURN** only the
ATTACHED A.C.E. COMMITMENT FORM.
To Your School District's A.C.E. LIAISON.

Please keep this page for your records and return the next page to ACE



Return ONLY the following SIGNED "COMMITMENT FORM" to your A.C.E. District Liaison.

ACE COMMITMENT FORM

_____ has my **permission** to participate in any programs or activities connected with the *Access to College Education (A.C.E.) program*. I have **read, understand and agree** to the expectations of each party participating in this agreement, as noted by my signature below.

❖ I understand that the activities will include school provided field trips, as well as events where parent/guardian involvement is needed. I further understand that information will be sent home with my son/daughter regarding upcoming field trips and events to keep me informed of what is happening.

❖ I agree to support my son/daughter in attending at least **four of these events per year** and in *maintaining an overall B average*.

❖ I understand that if my son/daughter needs medical attention, or does not follow rules while participating in *A.C.E. program events*, *the chaperon or activity advisor has my permission* to secure *appropriate emergency medical services or to take appropriate disciplinary actions*.

❖ I understand that it is the **parent/guardian responsibility** to pick up the student when ill or if he/she fails to follow the rules or directions of the chaperon.

PLEASE PRINT CLEARLY This will be your student's **MAILING** Information:

Student Name: _____ **District:** _____ **Grade Now:** _____

Student's Birthdate: _____

Parent/Guardian Name(s): _____
(Who the Student lives with - for **mailings**)

MAILING Address: _____
(Student's address- please give only **one MAILING** address for student)

CITY: _____ **ZIPCODE:** _____

PHONE: Home (____) _____ **Day/Work**(____) _____

Parent EMAIL Address: _____

And/or Student's Email if parent has no email address: _____

Student Signature: _____ **Date:** _____

Parent/Guardian Signature: _____ **Date:** _____
(Indicates Consent)

School Official Signature: _____ **Date:** _____

School District: _____

PLEASE RETURN THIS PAGE TO YOUR ACE LIAISON ASAP