ACCELERATED COLLEGE EDUCATION (ACE) PROGRAM

FACULTY CREDENTIAL APPLICATION
SUNY CORNING COMMUNITY COLLEGE

Directions: This application should be completed by high school faculty seeking approval to teach SUNY Corning Community College courses to high school students in the ACE program.

Please return the completed form
        to: ace@corning-cc.edu
                OR
Accelerated College Education (ACE) Office
SUNY Corning Community College
1 Academic Drive
Corning, NY 14830
Please print or type all information:

Date: _____

Anticipated Start Date of course: _____

Name: _____ --
              First   Middle   Last

Home Address: _____
                            Street Address

_____

    Town   State   Zip Code

Home Phone: _____School E-Mail: _____

Social Security #: _____Date of Birth:_____

Business Address: _____
                               Street Address

_____

    Town   State   Zip Code

Title or Position _____

ACE Courses you are interested in Teaching:

_____

_____

Education: List chronologically your college degrees and graduate work completed.
Indicate progress towards graduate degrees, if applicable.
**Special Note - Math applicants - please indicate your Graduate level coursework below

Institution	Dates Attended From-To	Degree or Hours Completed	Major Field of Study

<mark>**MATH APPLICANTS:**</mark>
<mark>**Please list the master level math courses and what college they are from:**</mark>

_____

_____

Experience: Teaching, educational, administrative, and other. Start with the most recent.
Include any AP or college level experience.

Institution	Dates of Employment	Subjects Taught/Job Responsibilities

Professional Affiliations:

Publications, Awards, Honors, Special Interests:

Transcripts of all college work must be submitted with this application. (Copies ar

Updated 7/2023

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