



333 S. Twin Oaks Valley Road, CRA 3400  
San Marcos, CA 92096  
Phone: 760-750-4ACE  
Email: ace@csusm.edu

**ACE Scholars Services Eligibility Exception Form**

**Student Information:**

|   |             |                                 |
|---|-------------|---------------------------------|
| First Name, Last Name:  | Student ID: | Day Phone or Cell:              |
| Mailing Address: Street Address, City, State, Zip   |             | Campus Email or Personal Email: |
| Academic Standing Upon Entering CSUSM: (circle one)<br><br>Freshman                      Transfer |             | Semester and Year Entering:     |

**Personal Statement:**

Please attach a personal statement, typed, up to 2 pages, that addresses the following:

1. Information and rationale as to why you should have an exception.
2. Why you want to be an ACE Scholar.

**Student Signature:**

By signing this form I certify that all of the information provided is accurate. I understand that exceptions to the ACE Scholars Services eligibility criteria will be reviewed on an individual basis and it is at the sole discretion of the Director of ACE Scholars Services to make exceptions to eligibility.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Submit completed form and personal statement to the ACE Scholars Services office located in Craven Hall, Suite 3400, or by Email: ace@csusm.edu.**

**For Office Use Only**

Approved     Denied

Reason Denied: \_\_\_\_\_

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_