



American College of Advanced Studies™

A.C.A.S.

ADVANCED PROFESSIONAL EDUCATION FOR THE AI ERA

Leadership • Communication • Integrative Health • Artificial Intelligence • Professional Transformation

APPLICATION FOR ADMISSION

Application Fee: \$210

Complete all applicable fields. Electronic or printed submission accepted.

1. APPLICANT INFORMATION

Legal First Name

Middle Name

Last Name

Preferred Name

Date of Birth

Citizenship

Street Address

City / State

ZIP / Postal Code

Country of Residence

Telephone

Email Address

2. PROGRAM OF INTEREST

☐ Postdoctoral Professional Certificate ☐ Advanced Professional Certificate ☐ Executive Professional Certificate

☐ Other ACAS Professional Program ☐ Leadership / Communication ☐ Integrative Health / AI / Transformation

Program / Certificate Title

Area of Study / Specialization

3. ADMISSIONS ELIGIBILITY

☐ Doctoral degree or equivalent advanced professional qualification.

☐ Graduate-level degree or equivalent advanced education plus substantial professional, executive, leadership, or specialized experience.

Highest Degree / Credential

Field of Study

Institution

Year Awarded

Professional Experience (Years)

Current / Most Recent Position

4. EDUCATION & PROFESSIONAL PROFILE

Additional education, licenses/certifications, or significant professional experience (CV may be attached):

5. PURPOSE & PROFESSIONAL GOALS

Primary objective (check all that apply):

☐ Career advancement ☐ Executive/leadership development ☐ Expand expertise ☐

Interdisciplinary knowledge

☐ Apply AI to my profession ☐ New specialization ☐ Communication/influence ☐

Entrepreneurship/innovation

☐ Advanced professional responsibilities ☐ Intellectual/professional development ☐ Other:

Brief statement of purpose / expected outcome:

6. ONLINE & ENGLISH-LANGUAGE READINESS

☐ Reliable computer/device access ☐ Reliable Internet ☐ Comfortable with email/web applications

☐ Able to access online educational materials independently ☐ Able to participate effectively in English

Technology or accessibility assistance requested:

7. DOCUMENT CHECKLIST

☐ Completed Application ☐ Current Resume/CV ☐ Academic credential(s) ☐ Transcript(s), if required

☐ Professional license/certification, if applicable ☐ Professional statement ☐ Other:

ACAS may request reasonable additional documentation to verify eligibility or information provided.

8. PRIOR LEARNING / ADVANCED STANDING

Are you requesting consideration of prior education or professional learning? ☐ Yes ☐ No

If yes, briefly describe:

9. APPLICANT CERTIFICATION

I certify that the information provided is complete and accurate to the best of my knowledge. I authorize ACAS to review this application and supporting documents for admission purposes. I understand that submission does not constitute acceptance and that admission is subject to applicable ACAS policies, program requirements, availability, and verification of required documentation. This application is not an Enrollment Agreement and does not by itself create a contractual obligation.

Applicant Name

Applicant Signature

Date

10. ADMISSIONS OFFICE USE ONLY

Application Received

Reviewed By

Date Reviewed

Decision: ☐ Accepted ☐ Conditionally Accepted ☐ Pending ☐ Not Accepted ☐ Additional Documentation Required

Verification: ☐ Credentials Verified ☐ Eligibility Satisfied ☐ Program Requirements Reviewed ☐ Enrollment Agreement Required

Admissions Official

Signature

Date

APPLICATION PRIVACY NOTICE

Information collected through this application is used for admissions evaluation, student records, institutional administration, and other legitimate educational purposes, subject to applicable policy and law.

www.ACAS.college info@ACAS.college

ADMISSIONS OFFICE:
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Fullerton, California 92835