

Division of Health and Human Services

Handbook Acknowledgement Form

I, _____, hereby acknowledge that I have received and read a copy of the student handbook for the Nursing Program.

By signing below, I agree to abide by the requirements, standards, and policies and procedures contained herein, including by reference or hyperlink, and any changes that may occur from time to time. I also understand that I am responsible for understanding the information within this handbook. I acknowledge that any deviation from or violation of the requirements, standards, and policies and procedures contained herein will be subject to disciplinary action, including but not limited to my removal from the academic program. In addition, I acknowledge that revisions to this handbook will be made periodically, with or without prior notice and that I am responsible for checking for updates to program information.

Furthermore, along with abiding by this academic program handbook, I agree to abide by the Columbus State Policies and Procedures, course syllabi, the Columbus State Student Handbook, and the Columbus State Catalog.

Also, by signing this form, I acknowledge that I am able to meet each Nursing Program Standards Essential, either with or without reasonable accommodations.

I acknowledge that my signature on this form does not guarantee my progression in the academic program.

(Student's Printed Name)

(Student's CID)

(Student's Signature)

(Date Signed)

(Signature of Program Coordinator)

(Date Signed)