STUDENT HANDBOOK ACKNOWLEDGEMENT

I, the undersigned, understand that that there are policies specific to the BSN program. I understand that I am responsible for those policies and have been told how to access a copy of the program handbook. I further agree that the School of Nursing has the right to make necessary/needed changes in the policies and procedure here within.

I, the undersigned, have read the policy on academic honesty. I understand that I am expected submit work that is totally my own. If a faculty member authorizes a group activity, I may work with other students.

I, the undersigned, will appropriately reference all written work that is taken from the works of others.

I, the undersigned, also understand that this policy is binding on all of my work for the program including, but not limited to exams, projects, papers and presentations.

I, the undersigned, understand that violation of this policy may lead to course failure, and/or probation, suspension or permanent dismissal from the program.

TO BE COMPLETED BY STUDENT

Last Name	First Name	Middle Name	Laker ID

Signature	Date

TO BE COMPLETED BY WITNESS

Last Name	First Name	Middle Name	Laker ID

Signature	Date