

ACKNOWLEDGMENT OF REVIEW & UNDERSTANDING
OF THE NURSING STUDENT HANDBOOK CONTENTS

By signing below, I acknowledge and verify receipt of the Donnelly College Nursing Student Handbook. By signing below, I acknowledge that I have reviewed the College's student procedures.

I have read these Policies and Procedures and understand that these Policies and Procedures apply to my enrollment in the Nursing School at Donnelly College. I also understand my responsibilities and Donnelly's expectations as they pertain to my enrollment and my role as a nursing student. I understand that I am responsible for complying with these Policies and Procedures and failure to comply may result in disciplinary action up to and including dismissal from the program.

I understand that Donnelly College, the Nursing Department and the Student Affairs Office reserve the right to change, interpret, withdraw, or add to any of its policies or procedures at its discretion and without prior notice or consideration to any student. None of the policies or procedures have been or are required to be approved by any student or student group.

_____ date _____
Nursing Student Signature

_____ date _____
Nursing Faculty or Staff Signature

Please give the completed signed copy to the Nursing Administrative Coordinator, Rm 237 Academic Building fhuff@donnelly.edu