

**Nova Southeastern University
Nursing Department**

Receipt & Acknowledgement of Policies, Procedures & Materials

Please read the following statements and sign below to indicate your receipt and acknowledgement of this material.

1. I have online access to and have reviewed the current **CAHN Student Handbook**. I understand that the guidelines, rules and provisions described in the nursing department are subject to change at the discretion of the nursing department at any time, but that any changes will be communicated to me prior to implementation. I further understand that this replaces all previous Academic Year Handbooks.
2. I have online access as well, to the current **Health Professions Division Catalog**.
3. My matriculation may be terminated for violating any policy, guideline or procedure in the materials referenced above.
4. I acknowledge that the nursing department program may record any or all practical laboratory examinations, simulations, and/or exercises. I agree that the digital recording of my performance may be used for educational purposes, as well as a performance review for grading. The recording and its contents are the property of the nursing department.
5. An audience response system (ARS) device may be utilized throughout my time in the program. I am personally and financially responsible for the equipment. If lost or damaged, it will be my responsibility to purchase a new ARS.

Printed Name: _____ Date: _____

Signature: _____

Witness Printed Name: _____

Witness Signature: _____