



APPALACHIAN STATE UNIVERSITY

BEAVER COLLEGE OF HEALTH SCIENCES

Nursing

DEPARTMENT OF NURSING

Student Handbook Agreement Form

I, (print name) _____

- have received the current academic year ASU Department of Nursing Student Handbook.
- am aware that the handbook is available for review on the ASU Nursing Department website.
- have read in its entirety, the current academic year ASU Department of Nursing Student Handbook.
- acknowledge that I am responsible for its contents and for adhering to the policies therein.

BSN or RN to BSN Undergraduate handbook

MSN Graduate handbook

Signature

Date