



Statement of Understanding

Please read, sign and submit this form to the Office of Academic Affairs.

DUE BY SEPTEMBER 20, 2019

I, _____
(Student Name)

have accessed and read an electronic copy of the Academic Catalog found at <https://psr.edu/academics/academic-catalog/>. I understand the policies and have reviewed the information specific to the program(s) for which I have been admitted.

The program(s) to which I have been admitted to at PSR is/are:

(Please list all degree and certificates for which you were admitted)

I agree to abide by the policies stipulated within, including future addenda to the Academic Catalog, and understand that compliance with the terms of these policies is a condition of my active student status at PSR.

I understand that if I have any questions at any time regarding these policies, I will consult the Assistant Dean of Academic Affairs & Registrar or the appropriate Staff/Faculty members.

I understand my registration and active student status at PSR may be rescinded if I do not sign and return this form by September 20, 2019 or if I fail to abide by the policies contained within the Academic Catalog.

Signature

Date

Office Use Only

Date Received: ____/____/____ Received By: _____