

STUDENT ACKNOWLEDGMENT AND AGREEMENT

By my signature, I acknowledge that I have received a copy of the syllabus for this course. I have read and understand the requirements necessary to successfully complete this course. I understand that it is my responsibility to follow all of the policies set forth in the syllabus. I understand and agree to satisfactorily complete all assignments and course work by the time specified in the syllabus.

I also acknowledge my understanding of the ASU Academic Honesty Policy, the ASU Honor Code, and all other handbook policies of Albany State University and the Department of Social Work and agree to fully adhere to them.

Course Number and Title	SOWK 4441: Social Work Practice III: Communities and Organizations
Semester/Year	Fall, 2019
Student's Name [Please print]	
Student's Signature	
Date	

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