



**CERTIFICATION OF ADMISSION AND AGREEMENT
TO ABIDE BY COUNSELING PROGRAM POLICIES (rev. 2017)**

Student Name: _____

Semester of Admission: _____

I understand that, as a graduate student, I have certain rights, privileges, and responsibilities, as do the faculty, which are described in the Counseling Program's Student Handbook. In accepting admission to the Counseling Psychology Program in the Department of Psychology, I certify that I have received, read, and agree to abide by the provisions contained in the *Counseling Program Student Handbook: Policies and Procedures* (available on the psychology department website).

Student Signature

Date

Faculty Advisor or Program Coordinator

Date