

**Minnesota State University, Mankato**  
**School of Nursing**  
**The Pre-Licensure Program**  
**Confirmation of Reading Student Handbook**

I affirm that I have read the Minnesota State University, Mankato School of Nursing Pre-Licensure Program Student Handbook and am aware of the policies and procedures contained in the document.

I understand that The Pre-Licensure Program Student Handbook may change at the discretion of the faculty and academic leaders.

Further, I understand that I am responsible and accountable to adhere to the policies, procedures, and expectations of The Pre-Licensure Program.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_