



I, \_\_\_\_\_, have read SWAU's Certified Nurse Aide  
(name)

Student Handbook. I understand the expectations for this course, including the grading policy and agree to comply. I understand that not meeting these expectations will lead to not passing the course, being dismissed from the course or not being recommended for state testing. Class must be paid in full before the first day of class. Failure to do so will result in the loss of my place in the course. Refunds will not be given once the first day of class has begun.

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

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