

SYLLABUS ACKNOWLEDGMENT RECEIPT

MAT212-27757, SPRING 2016

Print Name: _____
Last First

Name you want me to call you, if different from above.

Contact Information:

Email: _____

Phone: _____

I have received a copy of the course syllabus for this class. I have read it and understand the course content, class procedures, semester schedule, and what is expected of me to earn credit with a specific grade in this class.

If circumstances are such that I cannot complete the semester, I understand that it is my responsibility to withdraw officially from the course.

Student Signature

Date