

Acknowledgment of PhD Student Responsibilities

I, _____
Full Name, Please Print

have been provided with the Arizona State University Counseling Psychology Doctoral Program Handbook. I understand that my enrollment status in the PhD program is based on my ability to continuously satisfy all academic program requirements, including but not limited to academic performance (including clinical skill development), professional dispositions, and personal growth. I also understand the remediation, retention, and dismissal policies as outlined in the handbook, in as much as my standing in the program and degree conferral can be impacted if I do not satisfy these requirements and adhere to these policies.

I understand that evaluation of the above requirements and provision of feedback is a necessary component of the Arizona State University PhD program. Therefore, I am aware that I will be continually evaluated regarding my appropriateness for the field of counseling and will be provided support and constructive feedback throughout my program. I further understand that the University may modify the policies and procedures as stated in the Graduate Student Handbook, the Graduate Catalog, and the PhD program handbook at any time. If modifications do occur, I will be notified via my ASU email.

***Please sign and return to Dr. Cheryl Warner (Cheryl.Warner@asu.edu) ASAP.**

Student Signature Date

Director of PhD Training Name and Signature Date