

Acknowledgment of NSU Policies

My signature below acknowledges my understanding that I am subject to all terms and conditions of employment as set forth in the NSU Employee Policy Manual as well as the NSU Faculty Policy Manual (if signer is a faculty member). My signature also acknowledges my willingness to review and abide by ALL policies and procedures of the university including all policies available online.

In addition, I acknowledge the availability of all policies for review online in the NSU Employee Policy Manual at www.nova.edu and/or the NSU Faculty Policy Manual at www.nova.edu. I further understand that the University reserves the right to modify its policies at any time and that the most up-to-date policy will appear in the policy manual online.

Name (Please print clearly): _____

NSU ID: _____

Department: _____

Signature: _____

Date: _____