Department of Audiology

Honor Code Agreement

I, ________________________________, agree to abide by the Honor Code of Nova Southeastern University’s Doctor of Audiology Program. I understand that I alone am responsible for completing the academic requirements of each course in the curriculum on accordance with the course syllabi without cheating, plagiarism, or deception in any manner. Dishonesty is considered a serious offense by the faculty and administration and can result in dismissal from the university.

Print Name: ________________________________

Signature: ________________________________

NSU ID #: N______________________________

Date: ________________________________