

## STUDENT HANDBOOK AGREEMENT

As a student of the Utah Valley University (UVU) Physician Assistant Program, I understand and agree that I shall abide by and be governed by all school and university policies wherever they may reside, including, but not limited to, the UVU Physician Assistant Program Student Handbook and UVU policies, as they may be updated from time to time.

Signature		
Print Name		
Student UVU ID #		
Date		