

MATH 10
SPRING 2012
SADDLEBACK COLLEGE

J. COX

This form must be signed and returned to the instructor by the second class meeting.

ACCEPTANCE OF COURSE SYLLABUS AND ACADEMIC INTEGRITY POLICY

I have read and possess a copy of the course syllabus. I am aware of the grading policy, the requirements for the course, the tentative exam schedule, and other course information detailed in the syllabus. I understand the no make-up policy for labs, quizzes and exams.

I have read the MSE Division Policy on Academic Integrity. I understand the policy and that appropriate disciplinary action will be taken if any form of academic dishonesty occurs.

NAME (please print): _____

Student ID #: _____

Signature: _____

Date: _____