

Boston University School of Education

Statement of Understanding

By signing this document I hereby certify that I have read the School of Education's policy on editing and on plagiarism and the Procedures for Review of Alleged Student Academic Misconduct. I understand that these rules apply to all of my academic and professional work at the School of Education and that serious consequences will follow upon violation of any of them. I also understand that a record of this document will be kept on file by the School of Education.

Date _____ B.U. ID# _____

Graduation Date _____

Please Print Name _____

Signature _____