

Acknowledgement Form for Health Services and Outcomes Research (HSOR) Graduate Students

As an entering graduate student, I agree to review the policies and procedures of the HSOR PhD Program at:

PhD Program in Health Services and Outcomes Research: [PhD Program in Health Services and Outcomes Research | School of Pharmacy](#)

I understand that I may seek discussion and clarification of these documents from the HSOR Program Director in the School of Pharmacy. Please be sure to review these specific policies and sign each statement below.

I have read and understand the information related to the PhD program in HSOR in the School of Pharmacy at the WVU Health Science Center; both the information at this website and online catalogs and policies to which this handbook refers. These include but are not limited to:

- WVU Graduate Catalog: [Health Services and Outcomes Research, Ph.D. < West Virginia University](#)
- Campus Student Code: [Campus Student Code | Student Rights and Responsibilities | West Virginia University](#)

I agree to abide by the requirements outlined in this document as well as the University requirements governing these degrees.

Signature:

Academic and Professional Standards

I pledge to adhere to the Academic and Professional standards for graduate students:

Academic and Professional Standards: [Academic and Professional Standards | School of Pharmacy](#) and to maintain the highest standard of scientific integrity in all that I do.

Signature: