

**SPECIALIST PROGRAM IN SCHOOL PSYCHOLOGY  
RESIDENTIAL SKILLS DEVELOPMENT INSTITUTE  
ACKNOWLEDGEMENT FORM**

*Please complete this form and return to Suzanne O'Sullivan at [osullivan@nova.edu](mailto:osullivan@nova.edu) within ten days of the date of this Residential Skills Development Institute email.*

I, \_\_\_\_\_, understand that I must attend the Annual Residential Skills Development Institute which requires attendance at the Fort Lauderdale-Davie campus of the university. This mandatory program event is typically held in the fall semester at the end of your first year or beginning of your second year in the program (prior to PSY 800 School-Based Practicum) and in the fall semester at the end of your second year or beginning of your third year in the program (prior to PSY 805 Applied Skill Practicum). Please visit the [Residential Skills Development Institute](#) page for more information.

My signature \_\_\_\_\_  
informed of this program requirement.

acknowledges that I have been

Print name: \_\_\_\_\_

NSU Student ID: \_\_\_\_\_

Today's date: \_\_\_\_\_

Email form to [osullivan@nova.edu](mailto:osullivan@nova.edu)