



RADIOLOGIC TECHNOLOGY PROGRAM

**Acknowledgement and Acceptance
of
Mammography Policy Addendum**

I understand that while I am attending the Southwestern Illinois College Radiologic Technology Program, violations of the rules and regulations on my part, may result in disciplinary action up to and including dismissal.

I understand that any new or changed policies will be made known to me and that the most current policy will apply. Also, I understand that it is my responsibility to ascertain understanding of the current policy.

I have received a copy of the new Mammography Policy, effective October 1st.

Printed Name

Signature

Date