SCHOOL OF SOCIAL WORK APPLICATION INFORMATION STATEMENT

Name:

Background Information:
Have you ever served in the military?  
- [ ] Yes  - [ ] No
If you served in the military, did you receive an honorable discharge?  
- [ ] Yes  - [ ] No
Have you ever been convicted of a crime?  
- [ ] Yes  - [ ] No
Have you ever been subject to dismissal from employment, an academic institution, etc?  
- [ ] Yes  - [ ] No
If yes, please explain the circumstances:

Which Masters of Social Work Program do you intend to enroll in?
- [ ] Full-time campus-based program
- [ ] Part-time campus-based program
- [ ] Part-time state-wide program

School of Social Work Specific Information:
Are you applying to other MSW programs?  If so, which ones?  
If yes, which ones:

__________________________________________________________________________________________
__________________________________________________________________________________________

Please indicate whether you have taken any of the following coursework from a Council on Social Work Education (CSWE) accredited Social Work program within the last 7 years. Please note that Psychology/Sociology, etc. coursework CANNOT be counted towards a Social Work degree and would NOT be applicable below.

Have you taken a Social Work Research Methods course?  
- [ ] Yes  - [ ] No
If so, please list the course number, course title, and the semester/year, you completed this course:
__________________________________________________________________________________________

Have you taken a Human Behavior and the Social Environment course?  
- [ ] Yes  - [ ] No
If so, please list the course number, course title, and the semester/year, you completed this course:
__________________________________________________________________________________________

Have you taken a Social Welfare Policy course?  
- [ ] Yes  - [ ] No
If so, please list the course number, course title, and the semester/year, you completed this course:
__________________________________________________________________________________________