



Master of Social Work Program

Department of Sociology, Social Work & Anthropology
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MSW Supplemental Application

Personal Information

Last Name _____ First Name _____

Please provide birth name or previous legal names _____

Address _____ City _____ State _____ Zip Code _____

Email _____ Phone # _____

Date of Birth _____ Male ___ Female ___ U.S. Veteran? Yes ___ No ___

Race/Ethnicity

Black, non-Hispanic
(Provide more information if you like) _____

American Indian or Alaskan Native
(Provide more information if you like) _____

Asian or Pacific Islander
(Provide more information if you like) _____

Hispanic
(Provide more information if you like) _____

White, non-Hispanic
(Provide more information if you like) _____

Have you been convicted of, or pleaded guilty to, any violation of law other than minor traffic violations?
Yes ___ No ___ If yes, on a separate page, give details including the specific charge and legal outcome.

Have you ever been, or are you currently, under probation, suspension or dismissal from any educational institution you have attended? Yes ___ No ___ If yes, give details, including the specific action, on a separate page.

Are you applying to other MSW programs? Yes ___ No ___ If yes, please list _____

Are you applying to other USU graduate programs? Yes ___ No ___ If yes, please list _____

How did you hear about USU's MSW program? _____

Program Information

MSW Program Applying for: 1-yr Advanced Standing Full-time _____ 2-yr Full Time _____ 3-yr Part Time _____

Are you willing to consider admission to other program if you are not admitted to your 1st choice? Yes _____ No _____

If you are applying to the Part-Time program indicate which site* you are applying to:

Brigham City ___ Kaysville ___ Tooele ___ Uintah Basin ___ Moab ___ Blanding ___ Price ___

**Students will be required to attend courses at site admitted to.*

If you are willing to accept admission to another Part Time site, indicate those sites you are willing to accept admission to. If you select more than one alternate site, please rank the sites according to your preference (e.g. 1, 2, 3, 4).

Brigham City	___	Rank	___
Kaysville	___	Rank	___
Tooele	___	Rank	___
Uintah Basin	___	Rank	___
Moab	___	Rank	___
Blanding	___	Rank	___
Price	___	Rank	___

Please list populations and/or fields of practice that interests you (e.g., children, mental health)

Educational Information

List **all** schools you have ever attended, or at which you have been registered (even if you ultimately withdrew), after your high school/GED graduation. If your application is approved, omission of any school from this list may be grounds for dismissal.

Undergraduate Schools Attended (List most recent schools first. Use additional paper, if necessary.)
College/University City/State Dates Attended Major Hours Earned Degree/Date

Graduate Schools Attended (List most recent schools first. Use additional paper, if necessary.)
College/University City/State Dates Attended Major Hours Earned Degree/Date

What academic honors have you received?

Work History Information (Attach Resume)

Work History (List most recent first. Use additional paper, if necessary.)		
Employer/Position	Dates (Start/End)	Job Duties

Applicant Signature

I understand that this application and all credentials included for my admission file are confidential and become the property of the Utah State University. These documents will not be returned, copied or released to any person(s) or to me. I certify that the information given in this application is true and complete without evasion or misrepresentation. I understand that willful omission, falsification or incomplete statements within this application may result in denial of admission or dismissal. I further certify that I am the sole author of my Personal Statement, without the assistance of an editor.

Applicant's Signature (full legal name) _____ **Date** _____