

Master of Social Work Program

FULL MSW PROGRAM

APPLICATION PART II

PAGE 1 OF 6

Application Deadline
Full MSW Program
March 1, 2019

First Name: _____

Last Name: _____

The Governors State University Master of Social Work Program is designed to be accessible to those who are employed full-time and gives preference in admission to those with employment or volunteer experience in the human services. Both the quality and quantity of this experience are rated in the review process. To help us in our admission decision, we ask you to provide the details of your employment and/or volunteer experience. Please see back page for describing your volunteer experience. We do not accept resumes.

Current Employment

Are you employed? Full-time Part-time Not employed

(If you are not currently employed, please go to the next section.)

Is your current employment in the social services? Yes No

(Please complete this section even if your employment is not in the social services)

Employer's Name: _____

Employer's Address: _____

City/State/ZIP: _____

When did you start your current employment? Month: _____ Year: _____

Please tell us about your duties and responsibilities in your current employment.

Social Service Employment Experience

Please complete information requested on employment in the social services for the last two years. Identify your most recent positions in the social services. If your current employment is in the social services, you do not have to repeat this information. A resume is not acceptable.

Employer's Name: _____

Employer's Address: _____

City/State/ZIP: _____

Was this employment: Full-time Part-time

Length of this employment: From: ____/____/____ To: ____/____/____
month year month year

Describe your duties and responsibilities:

Social Service Employment Experience

Please complete information requested on employment in the social services for the last two years. Identify your most recent positions in the social services. If your current employment is in the social services, you do not have to repeat this information. A resume is not acceptable.

Employer's Name: _____

Employer's Address: _____

City/State/ZIP: _____

Was this employment: Full-time Part-time

Length of this employment: From: ____/____/____ To: ____/____/____
month year month year

Describe your duties and responsibilities:

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Employer's Address: _____

City/State/ZIP: _____

Was this employment: ___ Full-time ___ Part-time

Length of this employment: From: ____/____ To: ____/____
month year month year

Describe your duties and responsibilities:

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Employer's Name: _____

Employer's Address: _____

City/State/ZIP: _____

Was this employment: ___ Full-time ___ Part-time

Length of this employment: From: ____/____ To: ____/____
month year month year

Describe your duties and responsibilities:

Volunteer Experiences in the Human Services

(Please provide us with any volunteer experience in the helping services in the past 7 years.)

Service Organization: _____

Address: _____

City/State/ZIP: _____

Average hours per month providing this service _____

Duration of this volunteer experience: ____/____
years months

Volunteer tasks:

Volunteer Experiences in the Human Services

(Please provide us with any volunteer experience in the helping services in the past 7 years.)

Service Organization: _____

Address: _____

City/State/ZIP: _____

Average hours per month providing this service _____

Duration of this volunteer experience: _____/_____
 years months

Volunteer tasks:

Volunteer Experiences in the Human Services

(Please provide us with any volunteer experience in the helping services in the past 7 years.)

Service Organization: _____

Address: _____

City/State/ZIP: _____

Average hours per month providing this service _____

Duration of this volunteer experience: _____/_____
 years months

Volunteer tasks:

Volunteer Experiences in the Human Services

(Please provide us with any volunteer experience in the helping services in the past 7 years.)

Service Organization: _____

Address: _____

City/State/ZIP: _____

Average hours per month providing this service _____

Duration of this volunteer experience: _____/_____
 years months

Volunteer tasks:

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Service Organization: _____

Address: _____

City/State/ZIP: _____

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Duration of this volunteer experience: _____/_____
 years months

Volunteer tasks:

Volunteer Experiences in the Human Services

(Please provide us with any volunteer experience in the helping services in the past 7 years.)

Service Organization: _____

Address: _____

City/State/ZIP: _____

Average hours per month providing this service _____

Duration of this volunteer experience: /
 years months

Volunteer tasks:

Essay Statement

In order to better assess the potential for advanced professional preparation and identify those individuals most compatible with the mission and goals of our program, applicants are required to complete essay responses to the questions/statements below. It is very important that you reflect and provide detailed, thoughtful responses. Your responses should reflect self-awareness, self-evaluation and self-reflection and demonstrate your compatibility with the mission of the Governors State University Master of Social Work Program.

In the area provided below, please respond to the following five questions.

1. Describe the experiences that have influenced your decision to become an advanced social work professional.

2. Why are you interested in the Governors State University Master of Social Work Program?

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3. Present your values, beliefs, and characteristics that you think are advantageous to a career in social work

4. Describe any experiences you have had with vulnerable, oppressed, or at-risk populations, and identify how these experiences have shaped your ideas and beliefs about social and economic justice.

5. Please describe your experiences with persons who are socially and culturally different from you and discuss how these experiences have helped broaden your perspective on social and cultural difference.