



SCHOOL OF SOCIAL WORK
DSW PROGRAM

APPLICATION COVER SHEET

Please select your preferred campus: [] New Orleans [] Biloxi [] No Preference

Personal Data

Full Name: [] Ms. [] Mr. [] Mrs.
Last First MI

Gender: [] Male [] Female [] Other/Non-specified

Date of Birth: Place of Birth:

If not USA, country: Social Security Number:

[] U.S. Citizen [] Permanent resident [] Student Visa [] Other:

Race/Ethnicity (Optional): (This information will be used for informational purposes only, consistent with applicable civil rights laws)

Are you Hispanic/Latino of any race? [] Yes [] No

- Please select all that apply: [] American Indian or Alaska Native [] Asian [] Black or African American [] Native Hawaiian or Other Pacific Islander [] White

Contact Information

Address:

City: State: Zip:

Phone: Alternative # (Cell/Work):

Email Address:

Education History

Please list all post-secondary schools that you have attended, your GPA and graduation date (eg: college, university, graduate programs)

<i>Name of Institution</i>	<i>Dates attended</i>	<i>Degree(s) Received</i>	<i>GPA</i>

Employment History

Please list all relevant employment you have held since receiving your MSW. Please do not include internships, assistantships, or unpaid positions.

<i>Employer</i>	<i>Title</i>	<i>Dates of Employment</i>	<i>Location</i>

Professional Affiliations

Please list any professional affiliation you have with social work or other relevant organizations.

<i>Organization</i>	<i>Position</i>	<i>Dates</i>

Licensing

Please list all states in which you are licensed to practice social work.

<i>State</i>	<i>Date Licensed</i>



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**AUTHORIZATION TO RELEASE
EDUCATIONAL RECORDS**

Please fill out this form if you wish to grant any third party individuals access to your educational records.



Name: _____

Social Security Number: _____

In accordance with Family Education Rights and Privacy Act of 1974 (“FERPA” or the “Buckley Amendment”), I, the undersigned, hereby authorize Tulane University to release for all purposes any and all financial, academic, disciplinary or other educational records and information.

I authorize the release of these records and information to:

- 1. _____ 3. _____
- 2. _____ 4. _____

This consent and authorization to release educational records to the above named individual(s) shall remain in effect until written revocation from me is received by Tulane. Tulane shall have a reasonable time to comply with any revocations. Any such revocation shall not affect disclosures made by Tulane prior to receipt of any such written revocation.

I understand further that (1) I have the right to consent to the release of my educational records; (2) I have the right to review such records on request; (3) I have the right to request changes or deletions to items which I believe to be inaccurate; and (4) in the event a change or deletion is rejected, I have the right to place a statement in the record explaining my view of the circumstances.

Student signature

Date

THIS INFORMATION IS RELEASE SUBJECT TO CONFIDENTIALITY PROVISION OF APPROPRIATE STATE AND FEDERAL LAWS AND REGULATIONS WHICH PROHIBIT ANY FURTHER DISCLOSURE OF THIS INFORMATION WITHOUT THE SPECIFIC WRITTEN CONSENT OF THE PERSON TO WHOM IT PERTAINS, OR AS OTHERWISE PERMITTED BY SUCH REGULATIONS.



Tulane
University

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DISCLOSURE STATEMENT

As part of the admission process, Tulane School of Social Work requires applicants to disclose information regarding any criminal convictions they may have had as an adult. This information is necessary to assist in advising students of any difficulties that may arise related to professional licensure, financial aid eligibility and other matters.

Name: _____

Social Security Number: _____

Please answer the following questions:

Have you ever been convicted of a felony as an adult?

Yes No

Have you ever been subject to disciplinary action by an employer or academic institution?

Yes No

If you answered yes to either of these questions, please explain this in your personal essay. This information may or may not influence admissions decisions.

Student signature

Date

Tulane School of Social Work

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