

**POST GRADUATE SCHOOL SOCIAL WORK LICENSURE
APPLICATION CHECKLIST**

First, gather all your supporting documents. Then, complete the top portion of this application checklist and attach it to your documents.

Name of Applicant: _____

Date Submitted: _____

- MSASS Graduate (copy of transcript) Year _____
Non MSASS Graduate: Social Work Program _____ Year _____
(Please complete the attached Social Work Course Review Checklist)
- CYF Concentration
- SSW Specialization
- Other Concentration (specify): _____
- Field Placement completed (indicate school district): _____
- One year work experience in school (school): _____
Year(s) _____
- LISW or LSW (provide copy)
- Post Master's Course Work/Training (List) _____

- Check (\$75.00) made payable to CWRU

For MSASS Use:

After reviewing your materials, it has been determined that the following course work needs to be completed:

- SSWM 519 SSW Seminar (offered at MSASS), fall semester
- EDU 510 Educational Studies (offered at B-W), offered fall and summer
- EDU 573 Education of Children with Special Needs (offered at B-W), offered fall and spring
- EDU 554 Pupil Personnel Services (Offered at B-W), offered summer
- Other: _____

Date reviewed: _____

Date mailed to applicant: _____

Return this form and supporting documents to: Student Services, Mandel School of Applied Social Sciences, 10900 Euclid Avenue, Cleveland, Ohio 44106-7164