

APPLICATION FOR STUDENT MEMBERSHIP

Position Description(s), if applicable

Membership Fee (Cash or Cheque) - \$20

PERSONAL INFORMATION

Legal First Name:		Legal Last Name:				
Address:						
City:		Province:		Postal Cod	de:	
Home Phone:			Cell Phone:			
E-mail:						
EDUCATION INFORMAT	ΓΙΟΝ					
Name of Educational Institut	ion:					
Degree Sought: BS	SW M	SW	PhD			
Year of Study in the Program	1:	Ехр	ected Date of Con	vocation (MN	M/YY):	
If enrolled in a MSW or PhD	program, do you	ı currently h	old a degree in so	cial work?	Yes	No
EMPLOYMENT INFORM	IATION					
Are you currently employed or volunteering within the scope of social work practice? Yes* No						No
If yes: Position Title(s):						
Organization Name	(s):					
*Position description(s) requ	iired					
ATTACHED DOCUMENT	ATION					
Copy of Government I	ssued Photo IC) (Driver's L	icense or Passpo	rt)		
Proof of Enrollment (0	Copy of Registr	ation Histo	ry Record or Lett	er from Aca	demic Inst	itution) 🗆

Please submit a completed application form and membership fee to:



Signature	Date

IMPORTANT NOTE:

Students are NOT authorized to use the title Social Worker or represent themselves as a Social Worker. A separate application must be completed for registration as a Social Worker.

Students are not eligible for registration as student members if:

- they hold a BSW or MSW degree accredited by CASWE or a social work program approved by the College; and
- they are employed or volunteering within the scope of social work practice outside of their practicum