



Student Steps of Responsibility for admission to the Wichita State University BSW Program and Practicum Program	Description of Steps
Attend a BSW Program Orientation as early into your major as you can	These are held twice a year, as part of the Social Work Friday event at the WSU School of Social Work. Students are required to attend orientation before they can be admitted into the social work program.
Meet with the BSW Program Director as early into your major as you can.	Call 316-978-7250 to schedule a meeting time to discuss your program into the Social Work program. In this meeting, a class plan for your future semesters will be discussed.
Apply to the BSW Program and Practicum when you have met the minimum criteria.	Complete the attached application and forms. There are two deadlines per year: October 15 and March 15. Applications are reviewed by the BSW Admissions Committee, and students are notified of entrance status into the program. Forms are also available online at <a href="http://www.wichita.edu/socialwork">www.wichita.edu/socialwork</a>
Attend a practicum program orientation in the fall of your junior year.	These are held in the fall semester, as part of the Social Work Friday event at the WSU School of Social Work. Students are required to attend orientation as part of their practicum process.
Complete your Senior Form/Application for Graduation with your social work faculty advisor.	Meet with your assigned social work advisor to complete this form in the fall semester of your junior year. If your advisor is, please call the WSU School of Social Work office at 316-978-7250 or an email to <a href="mailto:socialwork@wichita.edu">socialwork@wichita.edu</a>
Complete your Senior Form/Application for Graduation with LAS Advising.	Schedule a time to meet with an advisor in the LAS Advising Center at <a href="http://www.wichita.edu/lasadvising">www.wichita.edu/lasadvising</a>
Complete a practicum inventory and submit your resume in the fall of your junior year.	The practicum inventory provides the Director of Field Practicum and the Associate Director of Field Practice information on your interests and availability for practicum. This form is available at the practicum orientation. The form is also available online at <a href="http://www.wichita.edu/socialwork">www.wichita.edu/socialwork</a> . The due date for this form and resume will be announced at the mandatory Orientation for the Practicum Program.
Schedule your campus interview for practicum in December of your junior year.	Call our office 316-978-7250 or stop by the School office in



**BACHELOR OF SOCIAL WORK PROGRAM**  
Application for Admission

The following documents are necessary to complete the program application

- Application (incomplete applications will not be considered)
- Personal Narrative
- Two References (forms available at [www.wichita.edu/BSWapplication](http://www.wichita.edu/BSWapplication))
- Copy of transcript or Degree Works ± unofficial (WSU students can get a copy from MyWSU Self Service Go to Student Records, then Academic Transcript.)
- WSU Model (photo) Release Form
- If you are also applying for the Undergraduate Certificate in Social Work and Addictions, please complete page 7, and answer additional personal narrative questions applicable to the certificate.
- If you are also applying for the Undergraduate Certificate in Social Work and Child Welfare, please complete page 8, and answer additional personal narrative questions applicable to the certificate.

(Please print or type)

Date \_\_\_\_\_

*Program Information*

Are you a fulltime or parttime student?  Full time (12 hours or more)  Part time (less than 12 hours)

Anticipated graduation date? Fall 20  
Spring 20  
Summer 20

*Personal Information*

Name \_\_\_\_\_ MyWSU ID# \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Other Last Name(s) Preferred Name

\_\_\_\_\_ Street and number City State Zip Code

Telephone \_\_\_\_\_  
Home Work Mobile

Email(s) \_\_\_\_\_  
@shockerswichita.edu

Other \_\_\_\_\_

Attach a personal narrative (

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*Demographic Information (optional)*

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Demographic information is optional and is for statistical purposes only. It will in no way affect the consideration of your application.

Date of birth: \_\_\_\_\_ Gender:  Male  Female Veteran:  Yes  No

Race / Ethnicity:

Are you Hispanic or Latino?  Yes  No

Please select one or more of the following racial groups:

Asian  American Indian or Alaskan Native  Black or African American  
 White  Native Hawaiian or other Pacific Islander

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*Background Information*

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Have you ever been convicted of a felony or misdemeanor as an adult?  Yes  No

Has any governmental agency ever substantiated allegations made against you for physical, mental or emotional abuse or neglect, sexual abuse, or exploitation of (1) a child, (2) a resident of an adult care home, medical care facility, psychiatric hospital or state institution for the mentally retarded, or (3) an adult?  Yes  No

If you answered yes to either of the above, please attach an explanation.

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Program or the UCSWC Program. However, depending on circumstances, it may affect your ability to be placed in a field practicum, which is necessary to complete the BSW program or certificate requirements. Please contact the BSW Program Director, UCSWA Program Coordinator, or UCSWC Program Coordinator if you have any questions.

I understand that prior convictions, diversions or pending charges may affect my ability to be placed in a field practicum, which is necessary to complete the BSW program, UCSWA, or UCSWC. This means that while you may be admitted to the program, you may not be able to complete the certificate if there is something in your background that would prevent you from being placed in a field practicum. Many agencies require background checks. Some criminal charges may affect your ability to be licensed in the State of Kansas.

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*Ethical Agreement*

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I have read and understand the BSW Code of Ethics

I understand that I may be placed with an agency that requires one or more of the following types of insurance coverage: (a) professional liability, (b) automobile liability, and (c) health/medical. By signing this application, I hereby acknowledge that, if placed with an agency that requires such coverage, I am obligated to obtain, at my sole cost and expense, such insurance and maintain the requisite coverage during the duration of my practicum. I further understand and acknowledge that Wichita State is under no obligation to provide such insurance coverage on my behalf and indeed does not and will not provide such insurance coverage on my behalf. I may request a practicum placement with an agency that does not require some or all of the above insurance requirements. While Wichita State University will make a reasonable attempt to accommodate this request, I understand and acknowledge that such accommodation is not guaranteed.

I hereby request to be placed in a practicum that does require the following (check all that are applicable):

- Professional liability insurance in the amount of \$1,000,000 in each instance/\$3,000,000 in the aggregate.
- Automobile (including liability) insurance
- Health/medical insurance (including hospitalization coverage)

**NOTE:**

The NASW Social Work Student Professional Liability Insurance can be obtained by members of NASW. To apply for membership, contact the NASW office at 316-978-0400 or visit [www.nasw.org](http://www.nasw.org).

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*Practicum Statement*

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I understand that I will be required to attend practicum orientation as part of the placement process for the practicum program. I also will be required to complete a practicum inventory, along with a resume. These must be completed during the fall semester of my junior year by December 1<sup>st</sup>. After this point, I will be required to schedule a practicum interview to help determine my practicum placement.

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*Disabilities / Modifications*

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Wichita State University is committed to providing equal access to employment, educational program activities for students with disabilities. The University recognizes that students with disabilities may need accommodations to have equally effective opportunities to participate in or benefit from University education program, services and activities and will make reasonable modifications to the environment, policy and practice and/or provide auxiliary aids and services when the Office of Disability Services determines such modifications are needed for equal access.

Reasonable accommodation will be considered and may be made to qualified students who disclose a disability, so long as such accommodation does not significantly alter the essential requirements of the curriculum and training program, or significantly affect the safety of others.

I also understand, and acknowledge that it is my responsibility to notify Wichita State University if I am in need of an accommodation. I further understand and acknowledge that it is my responsibility to notify Wichita State University if there is any reason I cannot meet the expectations of the Social Work Program, or without reasonable accommodations.

# BSW Certificate Program in Social Work and Addiction

Yes, I want to apply for the BSW Certificate Program in Social Work and Addiction

I understand that I must complete the online Application for Degree indicating that I am applying for this certificate. (Available on the myWSU Portal, myClasses tab, under Graduation Links.)

I am currently a student at WSU with a degree in social work, in \_\_\_\_\_ (year)

Rank:  Freshman  Sophomore  Junior  Senior

Current WSU Student?  Yes  No, current college/university: \_\_\_\_\_

I have a degree in social work, in \_\_\_\_\_ (year)

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If you are not a current student, please attach transcripts from all universities attended.

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Be sure to address the questions in your narrative, as stated on page 3 of this application packet.

# BSW Certificate Program in Social Work and Child Welfare

Yes, I want to apply for the BSW Certificate Program in Social Work and Child Welfare

I understand that must complete the online Application for Degree indicating that I am applying for





I hereby grant \_\_\_\_\_ and/or parties designated by Wichita State University (including clients, purchasers, agencies and periodicals or other printed matter and their editors the right to reproduce, use, exhibit, display, broadcast, distribute and create derivative works from

\_\_\_\_\_ of the undersigned person. This grant includes, without limitation, the right to publish such images and/or audio, with or without my name or with a fictitious name, in the University newspaper, alumni magazine, and/or public relations / promotional materials, and any other marketing and admissions publications, advertisements, fund-raising materials, and any other University -related publication. The images and/or audio may appear in any of the wide variety of formats and media now available to the University and that may be available in the future, including but not limited to print, broadcast, videotape, CD -ROM, and electronic / online media.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed name \_\_\_\_\_

Witnessed by \_\_\_\_\_ Date \_\_\_\_\_

I am the parent or legal guardian of \_\_\_\_\_

I hereby approve the foregoing consent to Wichita State University's use subject to terms mentioned above. I affirm that I have legal right to issue consent.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed name \_\_\_\_\_

Witnessed by \_\_\_\_\_ Date \_\_\_\_\_

LOCATION:	DESCRIPTION:
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