



SCHOOL OF
Social Work

A&M-COMMERCE

SOCIAL WORK INFORMATION

Name: _____

Email: _____

Primary contact phone: HM / WK / CELL: _____

Address: _____

1. **WHICH SEMESTER WILL YOU BEGIN THE MSW PROGRAM?** FALL _____ SPRING _____ SUMMER _____
2. **SEQUENCE: FOUNDATION** _____ (No BSW) **ONLINE ONLY** _____
3. **SEQUENCE: ADVANCED STANDING** _____ (BSW Req'd) **ONLINE ONLY** _____
4. **CAMPUS: COMMERCE** _____ **MESQUITE** _____ **MCKINNEY** _____
5. **FULL-TIME OR PART-TIME SEQUENCE WILL BE DETERMINED BY YOU AFTER YOU HAVE BEEN ADMITTED TO THE MSW PROGRAM AND COMPLETE MANDATORY ONLINE ORIENTATION.**
6. **ARE YOU A TITLE IV-E APPLICANT?** Yes _____ No _____

PLEASE READ THE FOLLOWING PARAGRAPHS, SIGN YOUR NAME ON THE SIGNATURE LINE AND DATE THE FORM TO ACKNOWLEDGE YOUR RECEIPT AND UNDERSTANDING OF THESE TWO PARAGRAPHS.

NON-DISCRIMINATION STATEMENT

It is the policy of Texas A&M-Commerce and the School of Social Work to comply with all state and federal laws that prohibit discrimination on the basis of age, race, national origin, color, religion, gender, sexual orientation or disability in recruitment, admission and retention practices.

ETHICAL BEHAVIOR STATEMENT

I acknowledge that Texas A&M-Commerce, School of Social Work reserves the right to refuse admission to any applicant who falsifies or misrepresents the information on this application. The department also reserves the right to deny admission based upon lack of qualifications or evidence of ethical misconduct.

SIGNATURE: _____ **DATE:** _____