

PLEASE SELECT THE SCHOOL FOR WHICH YOU ARE APPLYING.

- Postbaccalaureate Premedical Program Graduate School of Arts & Sciences
 Graduate School of Social Work and Social Research

APPLICANT

Legal Name:

(Enter name exactly as it appears on official documents.) LAST/FAMILY/SURNAME

FIRST

MIDDLE

Preferred name, if not first name:

Former name(s), if any:

Birthdate:

MM/DD/YYYY

U.S. Social Security #, if any:

Permanent Address:

NUMBER AND STREET

APARTMENT #

CITY/TOWN

STATE/PROVINCE

COUNTRY

ZIP/POSTAL CODE

Preferred Phone: Home Cell

Home Phone: ()

Cell: ()

Email Address:

Mailing Address same as permanent address: Yes No

If different from above, please give your current mailing address for all admissions correspondence.

Current Mailing Address:

NUMBER AND STREET

APARTMENT #

CITY/TOWN

STATE/PROVINCE

COUNTRY

ZIP/POSTAL CODE

Phone at current address: ()

Use from:

MM/DD/YYYY

to:

MM/DD/YYYY

EDUCATION

BACHELOR'S DEGREE INFORMATION (*Please list first the institution where you received your undergraduate degree.*)

Name of Institution:

CEEB Code:

Institution Address:

Degree:

Dates attended: From:

MM/YYYY

To:

MM/YYYY

Date degree conferred:

MM/YYYY

Major Field of Study:

Secondary Field of Study:

Other Field of Study, please describe:

Institution Honors or Awards:

PLEASE COMPLETE THIS AREA FIRST WITH INSTITUTIONS WHERE YOU RECEIVED A DEGREE OR WERE ENROLLED IN OTHER COURSE WORK.

Name of Institution: _____ CEEB Code: _____
Institution Address: _____
Degree: _____ Dates attended: From: _____ To: _____ Date degree conferred: _____
MM/YYYY MM/YYYY MM/YYYY
Major Field of Study: _____ Secondary Field of Study: _____
Institution Honors or Awards: _____

Name of Institution: _____ CEEB Code: _____
Institution Address: _____
Degree: _____ Dates attended: From: _____ To: _____ Date degree conferred: _____
MM/YYYY MM/YYYY MM/YYYY
Major Field of Study: _____ Secondary Field of Study: _____
Institution Honors or Awards: _____

Name of Institution: _____ CEEB Code: _____
Institution Address: _____
Degree: _____ Dates attended: From: _____ To: _____ Date degree conferred: _____
MM/YYYY MM/YYYY MM/YYYY
Major Field of Study: _____ Secondary Field of Study: _____
Institution Honors or Awards: _____

Name of Institution: _____ CEEB Code: _____
Institution Address: _____
Degree: _____ Dates attended: From: _____ To: _____ Date degree conferred: _____
MM/YYYY MM/YYYY MM/YYYY
Major Field of Study: _____ Secondary Field of Study: _____
Institution Honors or Awards: _____

YOU MUST SUBMIT AN OFFICIAL TRANSCRIPT FROM ALL INSTITUTIONS LISTED. IF ADDITIONAL SPACE IS REQUIRED, PLEASE ATTACH AN ADDITIONAL SHEET, IN A SIMILAR FORMAT, TO THIS APPLICATION.

If any of your friends or relatives have attended Bryn Mawr or has been associated with Bryn Mawr in some capacity, please indicate.

NAME: _____
FIRST LAST/ MAIDEN/ MARRIED RELATIONSHIP TO YOU CLASS AT BRYN MAWR OR OTHER ASSOCIATION

NAME: _____
FIRST LAST/ MAIDEN/ MARRIED RELATIONSHIP TO YOU CLASS AT BRYN MAWR OR OTHER ASSOCIATION

ETHNICITY (Optional)

If you wish to be identified with a particular ethnic group, please check all that apply.

1) Are you Hispanic/Latino?

- Yes, Hispanic or Latino (including Spain) No

Please describe your background _____

2) Regardless of your answer to the prior question, please select one or more of the following ethnicities that best describe you:

American Indian or Alaska Native (including all Original Peoples of the Americas)

Are you Enrolled? Yes No

If yes, please enter Tribal Enrollment Number _____

Please describe your background _____

Asian (including Indian subcontinent and Philippines)

Please describe your background _____

Black or African American (including Africa and Caribbean)

Native Hawaiian or Other Pacific Islander (Original People)

Please describe your background _____

White (including Middle Eastern)

Other (If "Other", please specify): _____

GENDER (Optional)

- Female Male

CITIZENSHIP (Required)

US Citizen Dual US Citizen US permanent resident visa (Alien registration # _____)

Other citizenship (Visa type _____)

List any non-US countries of citizenship _____

How many years have you lived in the United States? _____

Place of birth:

_____ CITY/TOWN STATE/PROVINCE COUNTRY

U.S. Armed Services Veteran? Yes No

DISCIPLINARY HISTORY (Required)

1. Were you ever the recipient of any action by any college for

a) unacceptable academic performance or

b) conduct violations, even if such action did not interrupt your enrollment or require you to withdraw?

- Yes No

If "yes," explain fully on a separate document and attach to this application.

2. Have you ever been adjudicated guilty or convicted of a misdemeanor, felony, or other crime? Yes No

(Note that you are not required to answer "yes" to this question, or provide an explanation, if the criminal adjudication or conviction has been expunged, sealed, annulled, pardoned, destroyed, erased, impounded, or otherwise ordered by a court to be kept confidential.)

If you answered "yes", explain fully on a separate document. Please give the approximate date of each incident, explain the circumstances, and reflect on what you learned from the experience and attach to this application.

DEGREE PROGRAM

Please indicate the degree program to which you are applying.

- M.S.S.
 M.S.S.
Advanced Standing
- M.L.S.P.
 M.S.S./M.L.S.P.
dual degree
- M.S.S./M.L.S.P.
dual degree
Advanced Standing
- Ph.D.

All applicants to the M.S.S. degree program, please indicate the concentration in which you are most interested. If you are uncertain at this time, feel free to select "Undecided".

- Direct Practice/ Clinical Social
Work
- Community Practice/
Policy, Practice and Advocacy
- Undecided

Enrollment Status Full-time Part-time

Are you a transfer student? Yes No

Entry Year and Term _____

Have you previously applied to this program? Yes No

FINANCIAL AID

Do you intend to apply for financial assistance? Yes No

Admissions decisions are made independently of financial aid considerations. Financial assistance awarded by Bryn Mawr College is based primarily on financial need. Because resources are limited, students are expected to use personal, family and loan resources to the fullest extent possible.

OTHER SCHOOLS

To what other graduate school programs are you applying?

UNIVERSITY

DEPARTMENT

UNIVERSITY

DEPARTMENT

SOURCE OF INTEREST

How did you learn of the Bryn Mawr Graduate School of Social Work and Social Research?

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> Bryn Mawr College Web Site | <input type="checkbox"/> Faculty Member | <input type="checkbox"/> BMC Alumnae/i | <input type="checkbox"/> BMC Faculty Member |
| <input type="checkbox"/> BMC Current Student | <input type="checkbox"/> Career Development Office | <input type="checkbox"/> Employer/ Supervisor/Co-Worker | <input type="checkbox"/> Graduate Career Fair |
| <input type="checkbox"/> Directory of Graduate Programs | <input type="checkbox"/> Printed Mailing/Brochure | <input type="checkbox"/> Journal or Magazine | <input type="checkbox"/> Other |
| <input type="checkbox"/> Search Engine/ Other Web Site | | | <i>(If "Other", please specify:)</i> |
-

HONORS AND AWARDS

Please list below all awards, honors, scholarships and recognitions:

_____	HONOR	_____	DATE (MM/YYYY)
_____	HONOR	_____	DATE (MM/YYYY)
_____	HONOR	_____	DATE (MM/YYYY)
_____	HONOR	_____	DATE (MM/YYYY)
_____	HONOR	_____	DATE (MM/YYYY)

ACTIVITIES

Please list below in order of importance to you, your participation in any college or community groups or professional organizations:

_____	NAME OF ORGANIZATION	_____	ACTIVITY	_____	FROM (MM/YYYY) TO (MM/YYYY)
_____	NAME OF ORGANIZATION	_____	ACTIVITY	_____	FROM (MM/YYYY) TO (MM/YYYY)
_____	NAME OF ORGANIZATION	_____	ACTIVITY	_____	FROM (MM/YYYY) TO (MM/YYYY)

RESUME OR CURRICULUM VITAE (CV)

Please attach your current resume or curriculum vitae (cv) to your application.

Answer the questions below and attach them to your application. Your name should be typed in the upper right-hand corner of each page.

PERSONAL STATEMENT 1

Part I: Describe your reasons for choosing to pursue a graduate degree in social work. Discuss your career goals and indicate which personal, vocational, educational, and/or law related experiences have influenced your choice.

Part II: What are, by your own assessment, your strengths and weaknesses and how may these affect your role as a professional social worker?

PERSONAL STATEMENT 2

Advanced Standing Applicants complete question A; all others complete question B.

- A. For Advanced Standing applicants only: Present a case example of your work with an individual, family or group including the following: a brief description of the agency and its services; the presenting problem or case situation; your assessment of the case situation; the intervention plan used and evaluation of your work.
- B. For all other applicants: Choose a social problem in which you are vitally interested. Identify the factors that must be considered in order to develop a policy or program that addresses this problem. Discuss the social work practice issues inherent in your discussion.

For joint M.S.S./M.L.S.P. and M.L.S.P. applicants only: Include in your answer to question B how an understanding of law and legal processes can facilitate more effective social work practice.

REQUIRED SIGNATURE

I certify that all information submitted in the admission process—including the application, the personal statement/s, any supplements, and any other supporting materials—is my own work, factually true, and honestly presented. I understand that I may be subject to a range of possible disciplinary actions, including admission revocation or expulsion, should the information I've certified be false.

Applicant's Signature:

Date: