

BSW Program Application Checklist

Use this checklist to help you complete the requirements for the BSW Program Application. If you have questions regarding the application, please contact the Department of Teacher Education & Social Work at (478) 757-2544 or email rebekah.hazlettknuds@mga.edu. Initial each area below.

1. I confirm that I am requesting admission to the formal MGA BSW program, for the fall ______ semester and that I have attended the required orientation or have individually met with the BSW Program Director if unable to attend an orientation.

_____2. Acceptance to Middle Georgia State University. MGA Student ID # 983

3. Program Prerequisites

Successful completion of 82-85% (57 -63 of 69 hours) of the Core Curriculum, Area F and General Electives *Any deviation from this must be approved by the BSW Program Director

A minimum 2.5 overall GPA (institutional may be considered)

Completion of:

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MATH 1401 or 1200	PSYC 2103	SOCI 1011	SOCW 2500
PSYC 1101	SOCI 1160	SOCW 2215	

Below, briefly discuss your plan to complete any missing prerequisites or hours needed prior to the fall start.

4. Two Recommendation Forms

Identify two professional or academic references (coworkers, supervisors, professors) and then email the following Google Form link to the persons providing your references: https://forms.gle/jgfvot5SP8czQ3dC9. If a reference wishes to submit a written letter in addition to the form, they may upload one to the Google Form. It is the applicant's responsibility to send the recommendation Google Form to the persons providing references.

Name of Reference: _____ Type of Reference:

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5. BSW Program Application Packet (see: www.mga.edu/education-behavioralsciences/teacher-education-social-work/apply-social-work.php)

Apply to the formal BSW Program by submitting Step 1 of the application via the ONLINE APPLICATION. Collect all documents required for Step 2 of the application packet and send in ONE email containing all of the following required documents to rebekah.hazlettknuds@mga.edu using the subject line: First Last Name Application Packet (ex: Jane Doe Application Packet).

Your signature indicates that you have carefully read the Code of Ethics of the National Association of Social Workers and agree to abide by its principles and that you understand program progression policies; course sequence; expectations of professional behavior; expectations for advising; and the requirement to be available during regular school days/hours for internship, practice experiences and program-based requirements.

Last Name: _____ First Name: _____ Date: _____