Priority Admissions Deadline for Fall 2016 Admissions:

March  15, 2016

Spring Admissions (Advanced Standing - electives only): November 15, 2015
MSW APPLICATION CHECKLIST

*Applications will not be retained beyond the current admissions period.

_____ 1. Carefully review the program information in MSW application packet. If you have questions prior to applying, please contact Brandon Bailey, Dir. of Marketing and Continuing Education at 731.661.5388 or by email at bbailey@uu.edu. If you have questions regarding the status of your application, please contact Kim McNeil, Programs Coordinator, at (731) 661-5554 or kmcneil@uu.edu

_____ 2. Allow plenty of time for yourself and references to submit required information. Admissions are “rolling” in the MSW program. This means that applications for admission are accepted and reviewed as long as there are program openings available. When all program openings are filled, new applicants who meet requirements are placed on the program waiting list, however admission is not guaranteed. The admissions process is competitive, so applying early is strongly advised.

_____ 3. Complete the MSW Program Application.

_____ 4. Request official transcripts from ALL colleges and universities attended to be sent to:

    Union University School of Social Work
    MSW Admissions
    1050 Union University Dr., UU Box 2376
    Jackson, Tennessee 38305

The use of the transcript request forms (included in this packet) will expedite the receipt and processing of transcripts. All transcripts must be official. Transcripts in the applicant’s possession will not be accepted unless it is in an official envelope that is sealed by the institution issuing the transcript. The transcript must show degree conferred and date of degree. Union graduates need not request Union University transcripts.
MSW APPLICATION CHECKLIST (cont’d)

_____ 5. **Recommendations**
- One previous professor/instructor
- One current or previous supervisor
- One other current or previous professor/instructor or supervisor
- *If you have graduated with a BSW in the past 12 months, one of these recommendations must include your field placement supervisor.*

Recommendations should be submitted on the forms included in this packet. If additional information is included, it must be on the responder’s business letterhead. **References must be sent directly from the individual writing the recommendation in a sealed envelope.** References will be verified at the discretion of the MSW Admissions Committee.

_____ 6. **Admissions Essay/Statement**
The admissions essay is an important part of your application, and you should take time to respond clearly and thoughtfully to each topic included in the personal statement outline. It is recommended that you carefully proofread your essay for grammar, spelling, sentence structure and content. Admissions committee readers look to your personal statement to get a sense of “fit” between your vocational and life goals and the goals of the social work profession and the UU MSW program. The essay outline is included in the application. Please complete the admissions essay form and attach it to your essay.

_____ 7. **Complete the immunization form included in the application packet.** This form is required of all students entering the university.

_____ 8. **Enclose the $25.00 non-refundable application fee with your completed application packet.** Cash, check or a money order made out to Union University may be accepted.

_____ 9. **Mail the completed application packet to:**

Union University School of Social Work  
MSW Admissions  
1050 Union University Dr., Box 2376  
Jackson, Tennessee 38305

All information submitted becomes the property of Union University and cannot be copied or returned. Applicants may be asked for an interview, complete a writing sample, or submit additional information. Admissions decisions will be relayed via email; please ensure an accurate email is listed on this application. The use of university email addresses is not recommended as they are often closed after graduation. The School of Social Work is not obligated to disclose reasons for denials to the program. Students may be requested to complete a writing course at the discretion of the Admissions Committee (this course would count as one of the three required electives).
MSW ADMISSIONS APPLICATION

Please complete this application in its entirety. Only applicants that have fully completed the application will be considered for admission.

I. Program Options

- Advanced Standing, Full-Time, 1-Year (33 Credits) Spring 20___ Fall 20___
- Advanced Standing, Part-Time, 2-Years (33 Credits) Spring 20___ Fall 20___
- Traditional Full Time, 2-Years (60 Credits) Fall 20___
- Traditional Part Time, 3-Years (60 Credits) Fall 20___

Program Location
- Jackson
- Germantown

Please Type or Print Clearly

Name: ________________________________________________________________

Last First Middle/Maiden

Address: ________________________________________________________________

Street Apt/Suite #

City State Zip

Home Telephone ____________________________ Cell Phone ____________________________

Work Telephone ____________________________ Email address ____________________________

Social Security Number ____________________________

Union University admits students of any race, color, sex, disability, and national or ethnic origin. As prescribed by the Department of Education and the National Center for Education Statistics, we are required to report demographic information including racial background. This information is not used in the admissions process. Using the terminology of the NCES, please answer the following:

1. Are you Hispanic/Latino? □ Yes □ No

□ Male □ Female

Place of Birth ____________________________

Church Affiliation: ____________________________

2. Respond Yes to one or more of the following groups:

a. American Indian/Alaskan Native □ Yes □ No
b. Asian □ Yes □ No
c. Black or African American □ Yes □ No
d. Hawaiian/Pacific Islander □ Yes □ No
e. White □ Yes □ No
II. **Academic History** – List all colleges/universities currently or previously attended.

<table>
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<tr>
<th>College/University</th>
<th>Last Name on Transcript (if different)</th>
<th>Dates Attended</th>
<th>Degree / Date</th>
<th>GPA</th>
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If you hold a BSW degree, please list the name of the agency/organization where your internship was completed.

________________________
Agency/Organization

Location

Dates __________________________ Number of Clock Hours at Internship __________

III. **Professional Experience**

List employment you have held within the past five years beginning with the most recent. If unemployed, indicate activities/whereabouts. You may also attach a resume if desired.

Current Employer ________________________________________________________________

Address ________________________________________________________________

Street City State Zip

Previous Employer (if less than 5 years in current position) ____________________________________________

Address ________________________________________________________________

Street City State Zip

IV. **Volunteer Experience**

List any relevant volunteer work you have done (include internships).

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<tr>
<th>Agency Name &amp; Location</th>
<th>Duties</th>
<th>Dates</th>
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V. Prior Convictions

Social work agencies frequently obtain information about criminal records for those seeking internships and employment. Have you ever been convicted for any offense other than a minor traffic violation?

☐ Yes If yes, please give specifics on a separate piece of paper.

☐ No

*Answering “Yes” will not necessarily preclude your acceptance into the program. However, it may prevent placement in some field practicum agencies and/or licensure in certain states.

VI. Recommendations

List the names and phone numbers of the individuals you have selected to submit recommendation forms for you.

1. Academic: ____________________________ 2. Supervisor: ____________________________

3. Academic or Supervisor: ____________________________________________________________

*If you have graduated with a BSW within the past twelve months, the third recommendation must be from your BSW Field Supervisor.

Three recommendation forms must be completed and received before your application can be reviewed. Recommendations constitute an essential part of the admissions process. The people selected to provide recommendations should be chosen with care and should be able to provide information regarding your ability, character, past academic and employment performance over an extended period of time, and your potential of success in the practice of social work. Be sure to complete the top portion of the form before sending it to the person providing the recommendation.

VII. Citizenship

Federal laws require that, in order to enroll at Union University, one must either be a United States citizen or have proper legal immigration status certification. Prior to enrollment, students must present immigration paperwork to Union’s Designated School Official (DSO) for processing.

Are you a U.S. citizen? ☐ Yes ☐ No

If no, ☐ Permanent Resident ☐ Resident Alien ☐ Non-resident Alien

If you are not a U.S. citizen, an international student application must be completed and submitted with this application.

Annual reports indicating compliance with the Student Right-to-Know and Campus Security Act are available in the Office of Safety and Security during regular office hours. Admission to the University does not automatically guarantee admission to specific academic programs within the University. In compliance with all applicable state and federal law, including provisions of Title IX of the Education Amendment of 1972 and Section 504 of the Rehabilitation Act of 1973, Union University does not illegally discriminate on the basis of race, sex, color, national origin, age, disability, or military service in admissions; in the administration of its education policies, programs, or activities; or in employment. Under federal law, the university may discriminate on the basis of religion in order to fulfill its purpose. Persons who believe their rights under this policy have been violated should contact Office of the President, Union University. Union University is in candidacy with the Council on Social Work Education (CSWE), the national organization that accredits Master of Social Work programs.

I certify that all information that I have provided is complete and accurate. I understand that my failure to provide complete and accurate information may result in dismissal from the university, or other appropriate disciplinary action. If admitted to Union University, I agree to abide by the policies and provisions stipulated in the university catalog.

________________________________________________________  ____________________________
Signature of Applicant Date
MSW ADMISSIONS ESSAY

*Essays must be attached to the application and submitted via email to kmcneil.uu.edu*

The admissions essay is one of the most important parts of your application packet. It is your opportunity to share with the Admissions Committee information about yourself that will be used to evaluate your readiness for the program and the profession of social work. Make certain you give the committee members well-written description of your experiences, interests, values and career objectives. Please follow the essay outline addressing each of the questions below. The essay must be typed, double-spaced and at least seven (7) pages in length. Please include a cover page and reference page (these two pages are in addition to the 7 essay pages). Your writing should be clear, well organized, show strong evidence of critical thinking, and demonstrate mastery of grammar, spelling, and American Psychological Association (APA) style. (See www.apastyle.org) Please use the following headings (underlined, below) to guide your essay:

**Essay Outline**

1. **Interest and Motivation:** How did you first become interested in the social work profession? How has this changed over time? Discuss your motivation to pursue the MSW degree. What attracts you to Union University’s MSW program?

2. **Service Experience:** What experiences have you had in serving others?

3. **Role Model:** Has anyone been a role model for you in shaping your decision to be a social worker? Please elaborate.

4. **Social Problem:** Discuss a social problem that concerns you and why. How does that social problem relate to issues of diversity, social justice, or at-risk populations?

5. **Ethics:** (ADVANCED STANDING APPLICANTS ONLY) Based on the NASW Code of Ethics, identify an ethical dilemma related to the social problem you discussed. www.socialworkers.org/pubs/code/code.asp

*Complete the form below and attach this page to your admissions essay.*

I certify that I personally wrote the attached essay.

Applicant Name (print) __________________________________________________________

Signature _______________________________ Date ___________________
MASTER OF SOCIAL WORK RECOMMENDATION FORM

To the Applicant: Three references are required with the following requirements (below). If you have not been employed, please provide additional academic references. Complete the top portion of the recommendation form and send to the reference.

Requirements:

- One previous professor/instructor
- One current or previous supervisor
- One other current or previous professor or supervisor
- *If you have graduated with a BSW in the past 12 months, one of these recommendations must include your field placement supervisor.

Recommendation forms must be sent directly from the individual writing the recommendation.

APPLICANT’S NAME ________________________________________________________________

Phone: __________________________ email: __________________________________________

____ I have read the information above and I waive my right to read/review this recommendation

____ I have read the information above and I DO NOT waive my right to read/review this recommendation.

Applicant’s Signature ___________________________ Date __________

To the Recommender

Please complete portions of this form most appropriate for your relationship to the applicant and return to:

Union University MSW Program
MSW Admissions
1050 Union University Dr., UU Box 2376
Jackson, Tennessee 38305

All responses must be submitted in a sealed envelope with your signature across the seal.

Name ________________________________

Title/Organization Affiliation ________________________________

Address: ____________________________

Street City State Zip
MASTER OF SOCIAL WORK RECOMMENDATION FORM (cont’d)

Category of reference: _____ Academic  _____ Professional  _____ BSW Field Supervisor

1. How long have you known the applicant and in what capacity?

____________________________________________________________________________________________
____________________________________________________________________________________________

2. What characteristics or qualifications does the applicant have that would contribute to his/her success in the practice of professional social work?

____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________

3. What are the applicant’s academic/professional strengths and weaknesses?

____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________

4. Do you have any concerns about this applicant becoming a master’s level trained social worker? Yes ☐ No ☐

If yes, please explain (use an additional sheet of paper if needed)

____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
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____________________________________________________________________________________________
Please rate the applicant in each area listed below.

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<tr>
<th>Area</th>
<th>No basis to rate</th>
<th>Very Low</th>
<th>Low</th>
<th>Average</th>
<th>High</th>
<th>Very High</th>
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<tbody>
<tr>
<td>a. Academic Performance</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
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<td>b. Emotional Maturity</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
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<td>c. Written Communication Skills</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
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<td>d. Oral Communication Skills</td>
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<td>1</td>
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<td>5</td>
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<td>e. Flexibility/Adaptability</td>
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<td>1</td>
<td>2</td>
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<td>5</td>
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<td>f. Creativity</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
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<td>5</td>
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<td>g. Initiative</td>
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<td>1</td>
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<td>h. Integrity</td>
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<td>i. Breadth of general knowledge</td>
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<td>j. Ability to empathize with others</td>
<td>0</td>
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<td>k. Ability to advocate for self and others</td>
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<td>l. Ability to work cooperatively within a team (peer relationships)</td>
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<td>m. Leadership skills</td>
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<td>n. Values and respects diversity; sensitivity to vulnerable populations</td>
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<td>1</td>
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3. Recommendation concerning admission (check one):

- [ ] I recommend the applicant without reservation.
- [ ] I recommend the applicant with reservation (please explain in #4)
- [ ] I do not recommend the applicant (please explain in #4)

____________________________________________________  ____________________________
Signature                                                                 Date
Note: It is the student’s responsibility to mail this form to the college/university where credit was earned.

Name____________________________________________________ Social Security # ______________________

Student Address ____________________________________________ Street ____________________________
City _____________ State _____________ Zip ________________

Institution __________________________________________________________________________________

Institution Address __________________________________________________ Street ____________________________
City _____________ State _____________ Zip ________________

Name used when officially enrolled ___________________________________________________________________________
Last _____________ First _____________ Middle _____________ Maiden _____________

Date of Enrollment ____________________________________________ Birthdate ____________________________

Number of official copies requested ______ ( ) Self ( ) Please mail transcript to:
Check attached for $ __________________________

( ) Please mail transcript to: MSW Admissions Office
UU 2376
1050 Union University Drive
Jackson, TN 38305-3697

Student Signature____________________________________________________________________________________ Date ____________________________
All graduate students must complete parts A–C.

Name ______________________________________________________ Date of Birth ________________ Phone # ____________________________
Address ______________________________________________________________ Email ________________________________

A. MEASLES, MUMPS, AND RUBELLA (check one):

☐ Attach copy of Immunization record showing two (2) doses of Measles, Mumps & Rubella (MMR) vaccine

☐ Attach copy of immune MMR titer Date: ___/___/___ Results________________

The state of Tennessee requires all students, born after January 1, 1957, entering colleges and universities to provide proof of two (2) doses of Measles, Mumps, and Rubella (MMR) vaccine on or after the first birthday or proof of immunity to measles with an MMR titer (blood test).

☐ I was born prior to 1957.

B. VARICELLA OR “CHICKENPOX” (check one):

☐ Attach copy of Immunization record showing two (2) doses of varicella vaccine

☐ Attach copy of immune varicella titer Date: ___/___/___ Results________________

☐ Attach letter from health care provider stating that he/she believes student has had chickenpox. Year of illness: ___________

The state of Tennessee requires all students born on or after January 1, 1980 to provide proof of two doses of varicella (chickenpox) vaccine given no earlier than 4 days before 1st birthday or proof of immunity to varicella with a varicella IgG (titer) blood test.

☐ I was born prior to 1980.

Name of Physician/Provider ______________________________________________________________________________________
Address _______________________________________________________________________________________________________

C. HEPATITIS B (HBV) IMMUNIZATION:

Recommended for all new students and required for students in the School of Nursing. Hepatitis B (HBV) is a serious viral infection of the liver that can lead to chronic liver disease, cirrhosis, liver cancer, liver failure, and even death. Hepatitis B vaccine is available to all age groups to prevent Hepatitis B viral infection. A series of three (3) doses of vaccine are required for optimal protection. Missed doses may still be sought to complete the series if only one or two have been acquired. The HBV vaccine has a record of safety and is believed to provide lifelong immunity in most cases. Union University Health Services, located on the Jackson Campus, is open Monday – Friday 8 a.m.-4p.m. and offers Hepatitis B vaccine for $50 per injection (price subject to change).

☐ I decline receipt of vaccine to protect for Hepatitis B.

☐ I have received the complete three dose series of the Hepatitis B vaccine.

☐ I plan to receive the Hepatitis B series.

Student Must Sign Here ___________________________________________ Date ________________________________

I refuse immunization because of religious objections, have attached an official clergy statement, and affirm this reason under the penalties of perjury.

Signature ________________________________ Date ________________________________

Return to:
Union University
School of Social Work
UU 2376
1050 Union University Drive
Jackson, TN 38305