



SCHOOL OF SOCIAL WORK
COLLEGE OF HEALTH AND SOCIETY

BSW ADMISSIONS APPLICATION

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone \_\_\_\_\_ Email: \_\_\_\_\_

Student ID: @\_\_\_\_\_

What term are you applying for?

Spring Admission (Military Campus Program applications only - due December 15th)

Fall Admission (Downtown Campus Program applications only - due May 1st)

Are you planning on registering for classes this fall semester for which admission to the program is required?

YES NO

Are you planning on being a:

FULL TIME STUDENT PART TIME STUDENT

Total credit hours earned to date: \_\_\_\_\_

Number of current credit hours enrolled in this semester: \_\_\_\_\_

Current GPA: \_\_\_\_\_

I have completed the following prerequisites for admission into the Social Work program

Table with 5 columns: Prerequisite Name, YES, NO, IN PROGRESS, Grade: \_\_\_\_\_

**EMPLOYMENT (list most recent first)**

**Complete the following or attach a one page resume outlining your employment and volunteer experience.**

Company: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

**VOLUNTEER EXPERIENCE (List most recent first)**

Company: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

## PERSONAL STATEMENT & DEGREE PLAN

**Include in your application a typed personal statement (3 pages maximum) that addresses the following:**

- Reason for interest in entering the field of social work
- Assessment of your personal strengths and limitations
- Description of your current career goals and how pursuing a career in social work will help you accomplish these goals
- Examination of life experiences (including work, volunteer and personal experiences) and the relationship of these experiences to your choice of social work as a career

The personal statement will be evaluated regarding the above material and also will be considered a writing sample to evaluate your ability to express yourself in written form.

**\*HPU Students: Include in your application a copy of your degree plan printed from Pipeline.**

**\*Transfer Students: Include in your application unofficial transcripts of all colleges and universities attended**

## ACKNOWLEDGEMENT

\_\_\_\_\_, hereby apply for admissions into the Social Work Program as a major in Social Work. I have read all of the information pertaining to this process, understand it, and believe that I meet the qualifications as presented in this application. I understand that my admission requires that I meet the requirements as established by the Social Work program.

I acknowledge I have read and understand the BSW Student Handbook, available at:  
[https://www.hpu.edu/CHS/Social\\_Work/FORMS/General-Student-Forms.html](https://www.hpu.edu/CHS/Social_Work/FORMS/General-Student-Forms.html)

I have attached my Personal Statement: \_\_\_\_\_

I have attached a copy of my degree plan or unofficial transcripts: \_\_\_\_\_

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

**Please submit your application packet by April 1<sup>st</sup> for Fall entrance**

**SUBMIT COMPLETED APPLICATION VIA EMAIL TO:**

**SUBJECT LINE:** BSW ADMISSIONS APPLICATION

Dr. Michaela Rinkel, BSW Program Director

[mrinkel@hpu.edu](mailto:mrinkel@hpu.edu); Ph. (808) 566-2489. Office AC 112 (Loa campus)

**For Department Use Only**

Date application received in office: \_\_\_\_\_

Decision Date: \_\_\_\_\_

DECISION: \_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_ Conditional

Provide rationale and terms if it is determined that the student will be accepted on a conditional basis:

\_\_\_\_\_  
\_\_\_\_\_

Date letter sent to applicant: \_\_\_\_\_