

MSW OSUM Scholarship Application

Student Name: _____ Date: _____

Current Mailing Address: _____

City: _____ State: _____ Zip Code _____

Telephone Number: _____ Work Number: _____

E-mailAddress: _____

(Please note that if you are chosen for a scholarship an award letter will be sent to the address listed above)

Quarter & Year Entered/Entering MSW Program? _____

Please indicate your concentration: Clinical Administration

What is your field of interest? _____ Current GPA: _____

Please give the following information regarding your social work-related experience (employment and volunteer). Most recent experience first:

Name of Agency	Phone Number	Position Held	Dates

Please answer the following questions on no more than 3 typed, single-sided pages. Please use 1 inch margins, 12 point font and double space your responses.

- What community-building activities have contributed to your interest in a career in social work? How do these activities support your application for the scholarship(s) for which you have asked to be considered?
- How will this scholarship help you achieve your professional goals?

Return to MSW Program Office, 249 Ovalwood Hall, 1760 University Drive, Mansfield, Ohio 44906 **by August 1.**

Be sure to file a Free Application for Federal Student Aid (FAFSA – <http://fafsa.ed.gov>) to complete your scholarship application.