



## Summer 2019 Master of Social Work Advanced Standing Program (MSW ASP)

**Supplemental Application Window: October 15, 2018 – February 15, 2019**

**Cal State Apply Application Window: February 1, 2019 – February 28, 2019**

### Requirements

- A BA in Social Work received within the past 5 years from a CSWE accredited college or university
- An undergraduate cumulative grade point average (GPA) of 2.75 or higher and good standing at the last college attended.
- A completed supplemental program application form.
- A professional resume.
- Unofficial transcripts from all colleges or universities attended including Cal State LA.

### Application Process

Applying to the Cal State LA Downtown Graduate Programs is a two-step application process. First, applicants are required to complete and submit a Supplemental Program Application through the [College of Professional and Global Education's \(PaGE\) online portal](#). Applicants are required to complete and submit a University Application through [Cal State Apply](#).

#### Step One: Supplemental Program Application

- Complete the **Supplemental Program Application Form**
- Create an account for the [PaGE Online portal](#) if you are a first-time user
- Log into your [PaGE Online Portal](#) to upload and submit your supplemental program application and all required documents

**Documents for upload:** Completed Supplemental Application, Personal Statement, Professional Resume, copy of unofficial transcripts for all colleges or universities attended including Cal State LA. Letters of recommendation may be submitting in addition to the reference forms, however this is optional).

Save all documents as PDF files titled with your last name, first name, and name of document  
(Ex: *Smith\_John\_Resume*)

#### Step Two: University Application

- Create your user account in [Cal State Apply](#)
- Select the appropriate graduate program and campus location (*be sure to select Downtown LA*)
- Submit all, sealed official transcripts from all previously attended institutions to:

Office of Admissions  
California State University, Los Angeles  
5151 State University Drive  
Los Angeles, CA 90032

- **Transcripts must be received by March 15, 2019.**



Summer 2019
Master of Social Work Advanced Standing Program (MSW ASP)
Supplemental Program Application

Applicant Information

Last Name First Name Middle Initial

Date of Birth\* Ethnicity\*

Mailing Address City State Zip

Permanent Address (If different from Mailing Address) City State Zip

Telephone Email Address

Campus Identification Number (CIN)
(If applicable. If not, please enter N/A)

\*Birth date and ethnicity are optional used for statistical reports and identification of scholarships.

If you are a citizen of a country other than the United States, please name the country

Person to contact in case you cannot be reached Phone Number

Have you applied for admission to the Cal State LA MSW Program Before? [ ] Y [ ] N
(If Yes, when?)

Have you attended another MSW Program? [ ] Y [ ] N
If Yes, name of school

Dates of attendance Reason for leaving

List of other schools of social work to which you are applying and the status of your application(s)

## Education

Please answer the questions below. If an answer is not applicable to you, please respond with "N/A".

1. \_\_\_\_\_  
 Name of Undergraduate Institution Location

\_\_\_\_\_ Major Subject  
 Dates of Enrollment (month/year to month/year)

\_\_\_\_\_  
 Degree/Certificate awarded and date

2. \_\_\_\_\_  
 Name of Undergraduate Institution Location

\_\_\_\_\_ Major Subject  
 Dates of Enrollment (month/year to month/year)

\_\_\_\_\_  
 Degree/Certificate awarded and date

**Please indicate any languages other than English that you speak, read, and/or write fluently (optional):**

Language	Speak	Read	Write
	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N

## Employment History

As part of your application packet, please submit a resume listing all paid work (full-time and part-time), volunteer work, internships, or other work-related experience in human/social service settings in the last 10 years, beginning with your most recent employment.

Be sure to specify the approximate hours per week, even if they vary, and the specific duties related to the employment.

For this program, post-BASW experience is preferred. Please describe any such experience below:

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## Personal Statement Advanced Standing Program (ASP)

The Cal State LA School of Social Work application must include a personal statement of approximately six to eight (6-8) double-spaced pages, (one-inch margin all around, 12-point font) in essay format discussing each of the points listed below. The personal statement is an opportunity for applicants to share personal and professional experiences that have prepared them for graduate school in social work. The personal statement will also be used to evaluate applicants' critical thinking, self-reflective capacities, and advanced writing skills.

Answer the questions **in order**. Please do not copy/paste the questions but instead provide the **headings** (e.g., Professional Information). Failure to address any question or adhere to the instructions stated above will affect the evaluation.

### Professional Information

1. What are your short-term and long-term goals for a career as professional social worker?
2. Describe how your strengths **and** limitations may influence your development as a professional social worker.
3. Our school has a strong cross-cultural emphasis and values diversity. What attributes and values do you possess that can enrich our school's cross-cultural orientation? How do you think your worldview regarding diversity will influence your work in school and as a social worker?
4. Please describe any professional cross-cultural experiences you have had, especially with regard to value conflicts and how those conflicts were resolved.

### Educational Plan

Our program is rigorous and demands a great deal of time and attention. The Advanced Standing Program (ASP) begins with a short-term, intensive summer bridge. In the ASP program students spend an estimated 60 total hours per week for their studies (which includes 12 hours of classes, 24 hours of field internship, and 24 hours of reading, studying, and preparing class assignments). We highly recommend you do not work while in the program. (Please note these are estimates and a student's hours may be higher or lower).

5. What is your plan for managing your responsibilities with such a rigorous graduate program? For example, there is no flexibility when it comes to class and internship schedules, as it is a cohorted program; therefore, if you will be working while in the program, please explain how you will reconcile this with such a rigorous program. Please consider financial and time management issues.

## Vignettes/Case Illustrations

6. Discuss a situation in which you were confronted with a difficult value or ethical conflict. How did you resolve it? What were some of the factors you considered in making your decision? How was the person and/or other individual affected by the situation?

Please draw upon your own work/volunteer experience to illustrate how you managed the situation described. If you have not had such an experience in a professional setting, please draw upon a personal experience and discuss how you would manage the situation if it occurred in a professional setting per the questions above.

Do not use names or information that might violate the confidentiality of the individuals you decide to use in your descriptions.

Draw from your own work experience to illustrate how you would manage the situation described below. Do not use names or information that might violate the confidentiality of the individuals you decide to use in your descriptions.

7. Tony and Ana never expected to live into their eighties, but they are glad to be alive and glad they are still living in their own home. Maintaining the house has gotten harder since Tony had his first stroke. Ana finds herself exhausted and arthritis prevents her from getting around the way she used to. They cannot afford to hire someone to help them in their home. They've looked into alternative housing arrangements. The one thing that Tony fears most is that his condition will deteriorate and that he will end up in a nursing home.

Within two months, a series of small strokes affected him profoundly. His condition has deteriorated to the point where he needs help getting to the bathroom, as well as feeding himself. Ana has done the best she can, but their children have decided that Tony will go into their local nursing home, where he can get around the clock care. Tony and Ana are afraid and do not feel like they have a choice.

Please provide a brief case write-up. Include relevant clinical issues and/or concerns. What would be the case plan for this family, including, if applicable, necessary resources?

## Additional Information

Describe any additional information, not reflected in the enclosed forms that might enhance your application. For example, you may include achievements, publications, awards, and professional presentations, or other relevant information.

## References

**Three references are required: One from a professor/academic (A); one from your BASW field liaison (FL); and one from your BASW field instructor/supervisor (FI).** The academic reference must be from a professor who taught an academic class (i.e. not a field instructor). The professional reference must be from someone who supervised you in an employment or volunteer position (ie. Not a friend, mentor, etc.) If your placement field supervisor is the same person as your field instructor, please substitute a professional letter in place of the field instructor reference.

If a required reference is not provided, then a detailed explanation for this missing information should be provided; otherwise, your application will be considered incomplete. Please note that incomplete applications will not be reviewed.

Please be sure to use the reference forms provided, making copies as needed. If a letter is provided by the reference, it must be on his/her professional letterhead.

Name	Type	Title/Occupation	Organization	Relationship	Telephone
	<input type="checkbox"/> A				
	<input type="checkbox"/> FL				
	<input type="checkbox"/> FI				

## Important note regarding field placements: Please read carefully

Field placements are a requirement for the MSW program. Please be advised that field placements must be planned in accordance with state and federal laws and with consideration of field placement agency policies. Most field placement agencies require security clearance evaluations, background checks, Live Scan fingerprinting, drug screens, etc., to ensure the suitability of interns for placement in their agencies. In addition, some require physical examinations, tuberculosis tests, immunization verifications, Minnesota Multiphasic Personality Inventory (MMPI), valid CA driver's licenses, etc. Please be advised that if a student is unable to be placed at an agency due to issues with any of the above or similar issues, then the student may not be able to start/continue with the MSW program. Please also be aware that we do not provide nights and/or weekend field internships.

Please indicate any background issues including arrests, convictions, (even those you have expunged):

A car is essential for use in field instruction. Will you have a car available for your use?  YES  NO\*

\* *Not having a car available to you will limit the availability of field placements. If this is your situation, please explain and identify your alternative transportation arrangements.*

## Signature

Please sign below to acknowledge that you have read the statements above regarding field placements, and that you are aware that if a field placement cannot be found for you then admittance to the program will be revoked or deferred to the following academic year depending on the decision of the School of Social Work.

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

Please check this box to indicate that you have submitted a separate application to the University or are in the process of doing so at this time. Please note that if you do not apply to the University, you will not be able to start the MSW program even if you are admitted by the School of Social Work.

I certify that the information submitted in this application is true, complete, and accurate. I understand that if it is determined I was dishonest or misrepresented or left out information on my application, the School of Social Work has the right to automatically deny my application. I also understand that the School of Social Work reserves the right, on the basis of educational or professional judgment, to reject an applicant. I understand that applicant information may be shared for educational purposes.

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

## MSW Program Questions (optional)

The two items listed below are for research purposes only and will not be used in evaluating your application packet.

1. How did you hear about the Cal State LA MSW Program (i.e. friend, co-worker, flyers, graduate/professional school fairs, etc.)?

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2. We would like to know what factors influenced your decision to apply to the MSW program at Cal State LA. Please rank the top **5** factors in order of importance with **1** being most important.

- Registration fees/cost of program
- Geographical location of program
- Financial resources for students
- Prestige of the institution within the community/society
- Prestige of faculty members within the Social Work Department/School
- Positive feedback from graduates of that MSW program
- Strong recommendation to attend that MSW program from a faculty member/adviser
- Faculty research interests that match the students' interests
- Individual attention to students by faculty and staff (i.e., small student/faculty ratio)
- Student research opportunities
- Other



Reference Form

Instructions to the applicant: Complete this section and give the reference form with a self-addressed, stamped envelope to your reference. Please inform the reference that he/she should return the reference form to you sealed in the envelope you provided with his/her signature across the flap and that you will either mail or drop off your reference form/letter to: Aubri Rambke, MSW – (name of applicant), GE Room 220B, 5151 State University Drive, Los Angeles, CA 90032-8164.

The reference respondent may choose to mail it directly to us, in which case instructions to do so are provided in the respondent's section.

Applicant's Name

Applicant's Campus Identification Number (CIN)

Reference's Full Name

Under the 1974 Family Educational Rights and Privacy Act, the applicant is entitled to have access to his/her educational records and information on this form. If a student waives access to this right by signing below, this form will be considered confidential and the student will not have access to its contents.

I waive my right of access to this letter of reference and its contents by signing and dating below:

Signature of Applicant

Date

Reference: The applicant listed above gave your name as a reference while seeking admission to the California State University, Los Angeles Masters of Social Work Program. We would like to have your impressions of the applicant's academic abilities; qualifications for working in a helping profession; potential for success in graduate school and as a social work professional; emotional capacity; motivation and potential in working with various social problems.

Instructions: You may include a letter in addition to filling out this form but not in place of this form. If a letter is provided, it must be on your professional letterhead. If there is a signature above, this reference form will be treated as confidential between yourself and the Cal State LA Department of Social Work. If there is no signature above, the reference will not be treated as confidential. Once you have completed the form, please seal it in the enclosed envelope and sign the flap. Then, return it to the applicant so that he/she may submit all application material in one packet. If you wish to mail it directly to us, please send it to: Aubri Rambke, MSW – (name of applicant), GE Room 220B, 5151 State University Drive, Los Angeles, CA 90032-8164.

1. a. How long have you known the applicant?

b. In what capacity have you known the applicant?

2. Describe the characteristics and specific skills that demonstrate the applicant's potential in social work:

Three horizontal lines for writing the answer to question 2.

3. If any, please describe characteristics that may hinder the applicant's effectiveness as a social work professional.

Three horizontal lines for writing the answer to question 3.

Continued on back



4. Please rate the applicant in the following areas:

	Exceptional (top 5%)	Very Good (top 10%)	Good/ Average	Below/ Average	Not Observed
Intellectual ability/academic achievement					
Written communication skills					
Oral communication skills					
Leadership skills/potential					
Creativity, resourcefulness, and willingness to take initiative					
Experience working with various cultures/cultural sensitivity					
Interpersonal skills					
Capacity for self-awareness					
Ability to make sound judgments					
Concern for others/empathy					
Maturity and emotional stability					
Responsibility, consistency, and dependability					
Integrity, honesty					
Ability to accept constructive feedback					
Flexibility					
Potential and motivation for success in an MSW program					
Potential and motivation for a career in social work					

5. Please feel free to provide additional comments on the applicant's background and/or other information that you believe is important for the Department of Social Work to know or understand about the applicant and his/her potential success in a graduate program or as a future social work professional. You may attach a letter in lieu of completing this section.

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6. Please indicate your overall endorsement of the applicant:

- I recommend the applicant, without reservations, as an excellent prospect.
- I have some reservations, but would recommend the applicant as a good prospect.
- I have substantial doubts, but think the applicant can be given a chance to prove himself/herself.
- I feel that the applicant is not suited for the program.

\_\_\_\_\_  
Signature of reference Title

\_\_\_\_\_  
Name of agency/organization

\_\_\_\_\_  
Business address City State Zip

\_\_\_\_\_  
Business telephone Email

\_\_\_\_\_  
Date completed

***Thank you for your time and valued input!***