

Application for Stipends and Scholarships (For Currently enrolled MSW Students)

SCHOOL OF SOCIAL WORK THE UNIVERSITY OF ALABAMA

This application form should be completed and returned to the Student Services Office, School of Social Work, Box 870314, Tuscaloosa, AL 35487-0314 for you to be considered for stipends/scholarships administered by the School of Social Work. Notification of awards will be made as soon as possible, typically in late April. For priority consideration, please submit this form by March 1 of the year that you plan to enter the concentration year of the M.S.W. program.

Ms.
Applicant: Mr. _____ Social Security No. _____
Campus Wide ID No. (CWID): _____

Address to which notice should be sent:

Telephone Number:

() _____ (cell)
() _____ (home)
() _____ (work)

e-mail: _____

U.S. Citizen? _____

Financial aid requested
for Academic Year: _____ / _____

Expected Graduation Date: _____

Hometown _____

Marital Status _____

No. of Children _____ Ages _____

Are you currently a member of N.A.S.W.? Yes _____ No _____

At this time, which of the concentrations in the School of Social Work do you plan to pursue?

_____ Children, Youth, and Families _____ Health
_____ Program and Agency Administration _____ Mental Health
_____ Services to Older Persons

Are you willing to accept a scholarship or stipend that requires of you:

A field education placement designated by grantor? YES _____ NO _____

An obligation to seek, in good faith, employment in the grantor's field of work? YES _____ NO _____

Employment by grantor after graduation? YES _____ NO _____

High School _____ Date of High School Graduation _____

(You must also complete back of page)

Financial Statement

I. Income while in the M.S.W. program (including G.I., veterans, social security, alimony or child support, education loans while in the MSW program, employment while in school either full or part-time, etc.)

Income Source	Amount
_____	_____ (Mo.)
_____	_____ (Mo.)
_____	_____ (Mo.)

II. Other financial resources while you are in graduate school (including savings and checking accounts, trust funds, interest, college saving plans, scholarships that will be awarded during your MSW studies, etc.)

Financial Resource	Amount
_____	_____
_____	_____

III. Parents' Financial Resources (if claimed as a dependent or if they plan to assist you)

Father's Occupation _____ Annual Income _____
Mother's Occupation _____ Annual Income _____
Other sources _____

Spouse's Financial Resources

Occupation _____ Annual Income _____
Other sources _____

IV. Sources of debt. (Do not include home mortgage. Include education loans from undergraduate program, other loans, credit card, child support owed each month, etc.) Please put the amount next to each debt source.

Source of debt: _____ Amount : \$ _____
Source of debt: _____ Amount : \$ _____
Source of debt: _____ Amount : \$ _____
Total Amount: \$ _____

V. Additional Information [i.e. specific conditions that establish need for a stipend and/or scholarship.

I hereby certify that the information given in this application for stipends or scholarships is, to the best of my knowledge, accurate and complete. I understand that this form must be submitted prior to the beginning of each academic year to be eligible for stipends/scholarships. I also understand that additional application materials may be required for certain scholarships.

Signature: _____

Date: _____