

**SCHOOL OF SOCIAL WORK**

**MSW NON-SOCIAL-WORK ELECTIVE APPROVAL FORM**

This form must be used to document advisor approval of electives offered by any UA division other than Social Work.

Return this completed and signed form to the Social Work Registrar.

**Student's Name:** \_\_\_\_\_

**Student's CWID:** \_\_\_\_\_ **Student's Email** \_\_\_\_\_

**Course Number:** \_\_\_\_\_

**Course Name:** \_\_\_\_\_

**Course description (from current UA Graduate Catalog):**

**Why is this course justified as a component of the student's program of study?** (Use reverse side of this page for additional space, if necessary.)

Approved:

\_\_\_\_\_  
(Print Advisor's Name)

\_\_\_\_\_  
(Advisor's Signature)

\_\_\_\_\_  
Date