

SIMMONS

APPLICATION FOR ADMISSION

School of
Social Work



SIMMONS COLLEGE
BOSTON, MASSACHUSETTS

APPLICATION INSTRUCTIONS

Thank you for your interest in the Simmons M.S.W. Program. All of the information and materials necessary to apply are contained in this packet and are also available online at www.simmons.edu/ssw/apply. Applicants are asked to submit application materials in one complete package to the following address:

Office of Admission
Simmons School of Social Work
300 The Fenway
Boston, MA 02115-5898

We look forward to receiving your application!

ADMISSION CRITERIA

The Simmons School of Social Work seeks applicants who demonstrate solid accomplishments in educational and professional settings, and who possess leadership potential. Our admission committee considers each applicant's ability, experience, and potential for academic success in the program, and for professional success thereafter.

ADMISSION REQUIREMENTS

All applicants are required to submit the following:

- A completed application form**
- A non-refundable application fee of \$45** (payable to Simmons College)
- Three letters of professional or academic recommendation in signed and sealed envelopes, including:**
 - **For Advanced Standing applicants only: Recommendation from M.S.W. supervisor of B.S.W. field placement**
 - **For Transfer students only: An additional letter of good standing from current field education director, dean, or program director**
- Official transcript(s) of all undergraduate- and graduate-level courses taken***
- Statement of Professional and Educational Intent, including any of the following that are pertinent to your application:**
 - **Urban Leadership Program statement**
 - **Advanced Standing statement**
 - **Transfer statement**
- B.S.W. Field Placement Evaluation (Advanced Standing applicants only)**

*International transcripts must be officially translated and evaluated for educational equivalency.

We encourage you to keep photocopies of your application and supporting documents, other than those that are submitted in sealed envelopes.

INTERNATIONAL STUDENTS

In addition to the previously listed requirements, international students must submit the following:

- An official TOEFL score**, if English is not your first language (Simmons code 3761)
- A Certification of Finances form**, to demonstrate your ability to pay tuition and living expenses while enrolled at Simmons. The Certificate of Finances form may be found online at: www.simmons.edu/ssw/apply. Upon acceptance, a candidate will need to submit copies of his/her visa, passport, and SEVIS I-901 fee payment receipt in order for Simmons to generate an I-20 form.

APPLICATION INSTRUCTIONS (CONTINUED)

ADMISSION DEADLINES

The Simmons School of Social Work offers fall (September) and spring (January) enrollment. The application deadline for fall enrollment is December 15 for early acceptance, or February 15 for general admission. The application deadline for spring enrollment is October 15.

Please note: Incomplete application packets will not be reviewed until all materials are received. Upon your acceptance, the SSW will request a \$200 tuition deposit to secure your place in the program.

APPLICATION FOR ADMISSION MASTER OF SOCIAL WORK

FOR OFFICE USE ONLY

DATE RECEIVED _____

APPLICATION FEE RECEIVED YES NO

APPLICATION FOR

Entry in September _____

- M.S.W. full-time program
- M.S.W. extended program
- M.S.W./Urban Leadership Certificate, full-time program
- M.S.W./Urban Leadership Certificate, extended program

Entry in January _____

- M.S.W. full-time program
- M.S.W. extended program
- M.S.W./Urban Leadership Certificate, full-time program
- M.S.W./Urban Leadership Certificate, extended program

Please indicate your interest in:

- Advanced Standing (B.S.W. applicants) If you are not accepted into the Advanced Standing Program, do you wish to be considered for general M.S.W. program? YES _____ NO _____
- Transfer Student
- One-Year Placement Option

Please indicate if you are a candidate from one of the following Simmons M.S.W. program partners:

- Department of Social Services
- The Home for Little Wanderers
- Massachusetts Council of Human Service Providers
- Justice Resource Institute
- Other agency: _____

PERSONAL INFORMATION

Name _____
last first middle

Birth date _____ Social Security number _____
month day year

Present address _____
street apartment

city state zip

Telephone (_____) (_____) _____
home work

Email address _____

Permanent address _____
street apartment

city state zip

Telephone (_____) _____

Emergency contact person _____

Country of citizenship _____ Country of birth _____

If you are not a U.S. citizen, do you have permanent resident status? Yes No

If not, what is your visa status? _____

Languages other than English in which you are fluent _____

The Simmons School of Social Work seeks the following information about its applicants solely to evaluate its ongoing efforts to attract a diverse student body. Your response to this question will not affect your admission to Simmons College. Please indicate your ethnic/racial background:

- Asian American Black/African American Hispanic/Latino
- Caribbean American Caucasian/White Self identify: _____
- Pacific Islander Native American

Gender Male Female

EDUCATIONAL INFORMATION

List every school attended since you completed high school (most recent first). **In addition, please submit official transcripts for all undergraduate and graduate courses taken.**

School and location	Area(s) of study	Degree	Dates attended

Please list other training/special courses

Within the last five years, have you completed and passed an introductory statistics course with a "B" grade or better? Yes No

Course name _____ Year of completion _____

Institution name _____

SOCIAL WORK LICENSE INFORMATION

Do you hold a social work license in the Commonwealth of Massachusetts, or in another state? Yes No

Have you been censured or lost your social work license for any reason? Yes No _____

If yes, please explain _____

CRIMINAL RECORD INFORMATION

In our experience, agencies frequently request prior criminal record information when social work students are placed in the field. Therefore, it is helpful for applicants to disclose prior felony conviction information. This information may or may not influence admission/field placement procedures.

Have you been convicted of a felony as an adult? Yes No

If yes, please explain on a separate sheet of paper and enclose with the application.

INTERNATIONAL STUDENTS

International students must submit official Test of English as a Foreign Language (TOEFL) scores.

Have you taken the TOEFL test? Yes No

Date taken _____ Date will take _____

Have scores been forwarded to the SSW? Yes No

WORK HISTORY

List positions held, including volunteer positions (most recent first). Please feel free to attach résumé.

Organization	Location	Position	Dates

STATEMENT OF PROFESSIONAL AND EDUCATIONAL INTENT

For All Applicants

In three to five double-spaced pages, please describe the development of your interest in clinical social work. What key people, events, or circumstances — including professional, educational, and socio-cultural experiences — influenced your direction? Explain why you would be a successful student in this program and an effective clinical social worker.

For Urban Leadership Program Applicants

In addition to the above statement, please describe your interest in urban practice. Also, describe a situation where you undertook a leadership activity.

For Advanced Standing Applicants

In addition to a statement of professional and educational intent, please submit a summary of your B.S.W. internship experience in two to three double-spaced pages. Your summary should include:

- The social work models and approaches you utilized
- A case example in which you used theory to facilitate your understanding of the case, and to guide an intervention or develop a treatment plan
- A self-assessment of your learning to date, including a statement of your learning goals and the challenges you anticipate in an advanced clinical placement

For Transfer Students

In addition to a statement of professional and educational intent, please describe the reasons for your transfer request.

OTHER INFORMATION

How did you learn about the Simmons School of Social Work's M.S.W. program? _____

Have you ever applied to this school before? Yes No If yes, when _____

Optional: Please indicate other M.S.W. programs to which you have applied or are applying _____

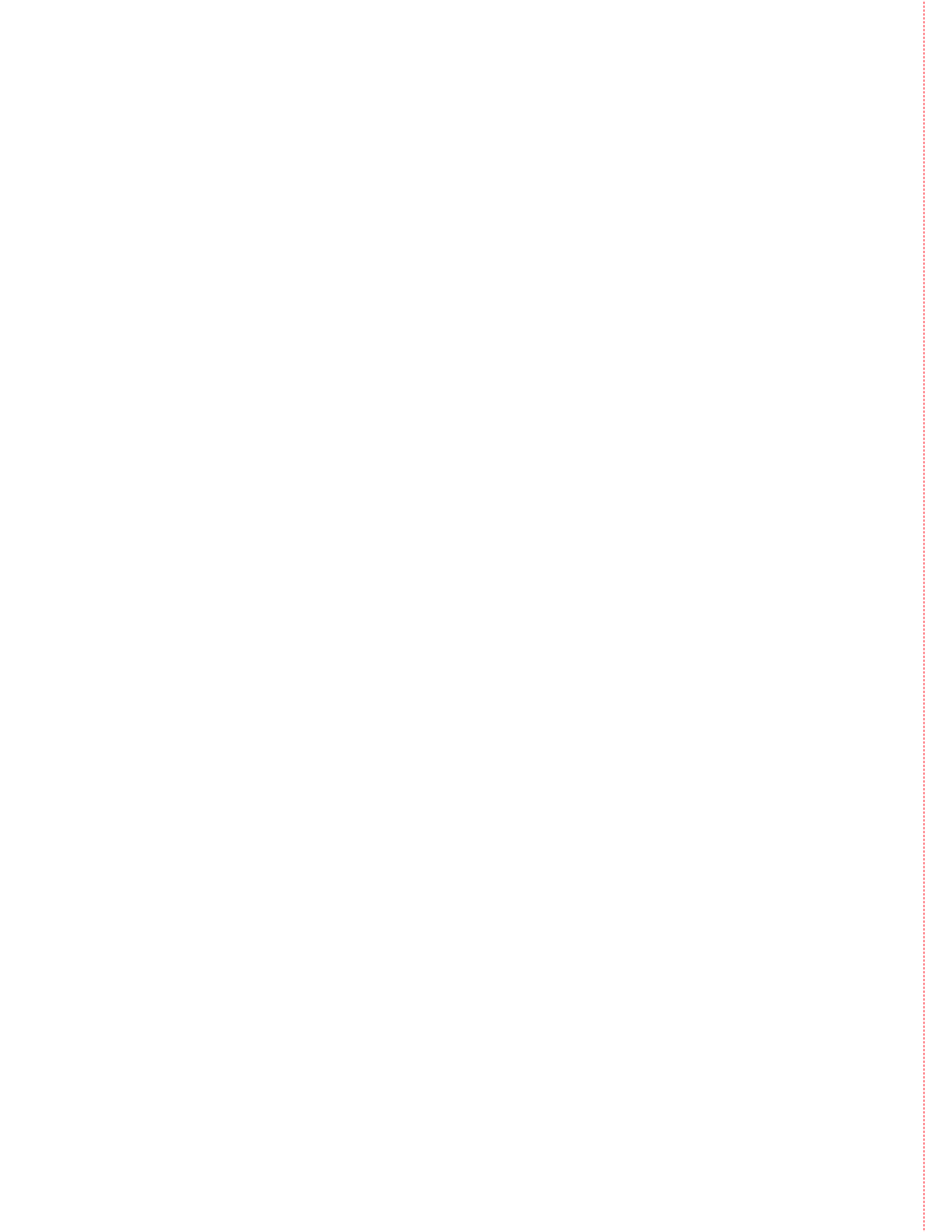
Will you need on-campus housing? Yes No

RECOMMENDATIONS

Please list three people whom you have asked to submit recommendations. These may be employers in social work-related fields, college faculty, or others with whom you have worked, volunteered, or studied. If you are currently or were recently employed in a social work job, one of the recommendations should be from your immediate supervisor. Please ask each evaluator to return his or her recommendation to you in a sealed envelope, and to sign the back flap.

For Advanced Standing Applicants

One of the three letters of recommendation must be from the M.S.W. supervisor of your B.S.W. internship, and should address your readiness for an advanced clinical internship. *Applicants who have been employed in a clinical social work position for a minimum of one year post-B.S.W. may submit a letter of reference from an M.S.W. employment supervisor.*



RECOMMENDATION FORM

SUBMIT TO: OFFICE OF ADMISSION SIMMONS SCHOOL OF SOCIAL WORK 300 THE FENWAY BOSTON, MA 02115

Recommender _____

Title _____

Agency/Institution _____

Address of organization _____
street

city state zip

Telephone (_____) _____

Email _____

TO THE APPLICANT

Recommendations are considered a critical source of information in the admission process. Please request recommendations from three people who can evaluate your professional performance and competence, plus your potential for further learning and professional growth. Supply the information requested below and give this form to your recommender along with a standard business envelope. Please ask your evaluators to return the recommendation to you in a sealed envelope, and to sign the back flap.

Applicant's name _____
last first middle or maiden

Address _____
street apartment

city state zip

Telephone (_____) _____ Email _____

By signing, I agree that the recommendation I am requesting shall be held in confidence by officials of the SSW, and I hereby waive my rights to examine it.

Applicant's signature _____ Date _____

TO THE RECOMMENDER

The person whose name appears above is applying to the Simmons M.S.W. program. Please provide the following information in as much detail as possible. We are interested in the intellectual/academic ability of this applicant, as well as his/her ability to relate to people, level of maturity, professional performance, and capacity for empathy and self-awareness.

1. How long and in what capacity have you known the applicant? _____

2. What do you consider the applicant's most outstanding strengths or characteristics? In your opinion, does this applicant have the ability to succeed as a professional clinical social worker? _____

3. What are the applicant's weaknesses? _____

4. In your opinion, how well is the applicant prepared for the academic rigor of graduate study?

5. Describe the applicant's character, values, and motivation.

6. Please rate this applicant's current abilities.

	Unknown	Below average	Average	Above average
Verbal communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analytical skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conceptual skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Problem-solving skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Decision-making skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work as a team member	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to respect and work with diversity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity and emotional stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Capacity for empathy and self-awareness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Knowing the candidate as you do, how would you summarize your advice to the SSW admission committee?

Strongly recommend Recommend Cannot recommend

8. Any additional comments you care to make would be appreciated. Please attach separate sheets if you wish.

May we contact you for further information? Yes No

Signature _____ **Date** _____

Please forward additional information about the Simmons School of Social Work to me or to members of my organization.

Mailing address _____
street

city _____ state _____ zip _____

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Applicant's name _____
last _____ first _____ middle or maiden

Address _____
street _____ apartment

_____ city _____ state _____ zip

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Strongly recommend Recommend Cannot recommend

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Fax: 617-521-3980

email: ssw@simmons.edu

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