UM-HEALS Student Application

Name: __________________________________________ Email: __________________________________________ Student @ ID __________________________________

1. Please identify your status: ______ BSW student ______ MSW advanced student

2. Have you been accepted into another training program such as BHWISE or Public Health Social Work Scholars?
□ Yes ________________________________ (please name)
□ No

3. Where is your field placement for the 2015-2016 academic year and briefly describe anticipated responsibilities:
________________________________________________________
________________________________________________________

4. Please initial below to signify your permission for use of your personal data as follows:
□ UM-HEALS Faculty can access my field education application and resume to evaluate my HEALS candidacy.
□ My application materials can be included in local and national evaluation efforts to classify and report characteristics of program applicants and enrollees.
□ I am willing to be contacted again for future UM- HEALS evaluation efforts.

________________________________________
Signature

________________________
Date

Be sure you have submitted all the required application materials identified below by June 26, 2015. MSW HEALS applications are to be emailed to Dr. Melissa Bellin (mbellin@ssw.umaryland.edu); BSW HEALS applications are to be emailed to Dr. Carolyn Tice (tice@umbc.edu).

□ This one-page HEALS Student Application
□ HEALS Commitment Letter
□ Field Instructor Reference (MSW HEALS applicants only)
  o MSW field Instructor should email this reference form directly to Dr. Melissa Bellin at mbellin@ssw.umaryland.edu;
□ 1-2 page letter describing your interest and experience in healthcare including interprofessional team practice, care/transition coordination, family-centered engagement, and service delivery to vulnerable health populations.