## MEMORIAL UNIVERSITY OF NEWFOUNDLAND SCHOOL OF SOCIAL WORK

## DOCTORAL PROGRAM APPLICATION

SURNAME:				
GIVEN NAMES:				
	(First)	(Second)		
ADDRESS:				
		(Postal Code)		
TELEPHONE:	(Home)	(Work)		
	(none)	(WOIK)		
E-MAIL ADDRESS:				
What is your language o	f normal use?			
Within the program design which concentration would most suit your learning goals?				

- □ Advanced Social Work Practice
- □ Social Work Education

Deadline for submission of application is **September 15th** (**Note:** Applications for the PhD Programs are accepted in even years only)

Attach to your application a detailed <u>Curriculum Vitae</u> in which you outline your education, employment, professional activities, research experience and publications. Attach copies of most recent publications, conference presentations, agency/government reports, and course outlines/teaching manuals.

NOTE: Please complete the following in addition to the online application for admission to the School of Graduate Studies.

## **Study Plan**

A study plan is a required, critical part of the application package, comprising a succinct document in which applicants outline their educational goals and expectations. Plans are, of course, subject to change, but should outline your current thinking with respect to several areas. The following points are provided to assist you with the development of this plan. Please limit to five pages.

- 1. Describe your professional and academic accomplishments to date and indicate how doctoral education relates to your future career goals.
- 2. Outline your educational goals in some detail. What do you hope to accomplish in the courses and internship?
- 3. What are your ideas at this point regarding dissertation research? What problem areas and research questions or hypotheses are you interested in addressing?
- 4. Describe why this doctoral program with its mission structure and resources meets your particular learning and research objectives.

APPLICANT'S SIGNATURE	 Date	

RETURN VIA EMAIL TO: gradapply@mun.ca

## Additional Information Form: (ID#87)

Memorial University protects your privacy and maintains the confidentiality of your personal information. The information requested in this form is collected under the general authority of the Memorial University Act (RSNL1990 CHAPTER M-7). It is required for the processing of your application and for administrative purposes of the School of Graduate Studies. If you have any questions about the collection and use of this information, please contact <u>phdsocialwork@mun.ca</u>.