**Employment History – Supplement I**

**Advanced MSW Program**

**Applicant’s Name:**

In this section, please provide a list of your paid employment history that **relates to social work only**, starting from your most recent position. Please be sure to include a complete list of duties and the primary responsibilities of the positions**. You will need at least 2 years minimum of post-BSW social work employment by the time you start the program.**

Please Note: You will also need to provide a copy of your resume with your application in addition to completely filling out this form.

**List your most recent employer below first (attach additional pages if required)**

|  |  |  |
| --- | --- | --- |
| Employer / Location 1 | Position / Title | From / To (Duration) |
|  |  | Month | Year | Month | Year |
|  |  |  |  |
| Immediate Supervisor  |
| Name:Are you using this Supervisor as a reference? Yes [ ]  No [ ] If not, please explain why: |
| Duties and primary responsibilities (below)  |
|  |
|  |
| Total hours worked at this position as of August 31, 2024:  |  |

|  |  |  |
| --- | --- | --- |
| Employer / Location 2 | Position / Title | From / To (Duration) |
|  |  | Month | Year | Month | Year |
|  |  |  |  |
| Immediate Supervisor  |
| Name:Are you using this Supervisor as a reference? Yes [ ]  No [ ] If not, please explain why: |
| Duties and primary responsibilities (below)  |
|  |
|  |
| Total hours worked at this position as of August 31, 2024:  |  |

|  |  |  |
| --- | --- | --- |
| Employer / Location 3 | Position / Title | From / To (Duration) |
|  |  | Month | Year | Month | Year |
|  |  |  |  |
| Immediate Supervisor  |
| Name:Are you using this Supervisor as a reference? Yes [ ]  No [ ] If not, please explain why: |
| Duties and primary responsibilities (below)  |
|  |
|  |
| Total hours worked at this position as of August 31, 2024:  |  |

You may add additional pages if necessary.