

Galloway, NJ 08205

Baccalaureate Child Welfare Education Program

New Jersey Department of Children and Families

Application for Financial Support and Child Welfare Traineeship

APPLICATION DEADLINE: March 15th

Name:		Social Security Number:		
Last	First	M.I.	_	
Driver's License (Include Sta	ite):			
Phone Number:	Perma	nent Address		
Cell Phone:	Street			
Preferred E-mail:	City		State	Zip Code
Other E-mail :	Mailin	g Address (if different fi	rom permanent addr	ess)
	Street			
	City		State	Zip Code
Name/Phone Number of Acad	•			
Date you were officially admit	ted to the Social Work major (n	nonth and year):		
•	ours officially completed at the	•	 :	
	ints and Scholarships) for next A		·	
•	from college/university (month			
Do you speak a foreign language				
2 0) 0 a 3 p 0 a 1 a 1 0 1 0 1 g 1 1 a 1 g a 1	age			
the following three questions: 1. Describe significant personal examples: 2. What personal qualities do you possess that might hinder you in 3. If you were to receive a child were to receive a ch	professional development. Your separate special possess that will aid you to be combecoming an effective social work relfare traineeship how would the seld is to provide "increased time for separate special works."	study social work, and tell us ne an effective social worker er in child welfare? stipend help you to accompl	how you developed you in child welfare? What p	or interest in child welfare. Dersonal qualities do you Dals? Be specific. (One of
n completing this application, I affired educational loan. In additional loan, and additional educational loan. In additional loan, and perpension of Child Protection and Perpensional staff merples of the complete of the c	n, I understand that, if offered func plete my social work degree progr manency (DCP&P) for two calenda anscript may be reviewed by the B mber from DCP&P. I also understan Id check, fingerprinting, and cleara	ling for study, I will be requin am expeditiously and, to acc r years following graduation CWEP selection committee o d that acceptance into BCW	ed to sign a legally bindi cept and maintain emplo . I understand that my a of my social work progra	ng contract committing yment in the New Jersey pplication and supporting m, and that committee may
hild Welfare Education Institute	-			
chool of Social and Behavioral Science Pichard Stockton College of No.		Signature of Applicant		Date
he Richard Stockton College of Ne [,] 01 Vera King Farris Drive	w Jeisey			