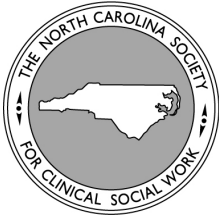


North Carolina Society for Clinical Social Work



PO Box 30006 Raleigh, NC 27622

919-850-3328

admin@ncscsw.org www.ncscsw.org

NCSCSW, the only organization in North Carolina dedicated to the profession of clinical social work. **It is our goal to promote clinical social work as a discipline, which provides superior clinical treatment and ethical practice.**

Our support of our membership is multifaceted, designed to keep members up to date on local and national issues, enhance clinical skills and provide numerous opportunities for professional growth and support.

Your membership benefits include:

- Opportunities to network with other clinicians
- Programs for continuing education credits, discounted for members
- Bi-annual newsletter with free advertising
- Mentoring for new professionals
- Consultation about ethical and legal concerns
- Free Annual Ethics Workshop
- Advocacy for clinicians and consumers through representation on the Professional Association Council and the Joint Insurance Committee
- Student Treatment Referral Program
- A state affiliation with the Clinical Social Work Association providing us with timely national alerts regarding legislative, insurance, and clinical practice issues

We encourage you to participate and take an active role in your society. Let us know how the Society can be helpful to you. We look forward to meeting you in person soon.

President

Mary Beth Tobin, LCSW

Membership Co-Chairs

Natalie Boucher, LCSW

Dan Ayers, LCSW

Celebrating 30 Years

In 1979, the catalyst for the formation of NCSCSW was the lack of continuing education and support for the clinical social work profession. Twenty years ago, NCSCSW and NASW were successful in lobbying the NC Legislature for a licensure law enabling clinical social workers to practice independently.

Yes, some things have changed but some have remained the same. In 2009, while our area is fortunate to have many high quality educational opportunities clinical social work, as a profession, is being threatened. It is clear NCSCSW is needed now more than ever to safeguard clinical social work practice, to provide support and mentoring for clinical social workers, and networking and peer support activities for members.

So, get involved and stay connected with the voice of clinical social work - NCSCSW.

Dear Social Work Colleague;

Please read carefully below to complete the membership process for the NCSCSW. Thank you for your interest in this organization; we look forward to your participation.

Membership in the NCSCSW is available to social workers who fall into these three categories:

1. Full membership: An MSW from an accredited School of Social Work and an active LCSW through the NC Certification Board. Membership dues: \$100/year
2. Transitional membership: An MSW from an accredited School of Social Work and a LCSW-P through the NC Certification Board. Membership dues: \$75/year
3. Retired/Student/Unemployed membership: For social workers that have retired, are unemployed or students in an MSW graduate program. Membership dues: \$35/year

Your dues contribute toward the following activities: state and national lobbying efforts for clinical social workers and mental health concerns; local and statewide educational programs of clinical interest; public relations and advocacy for clinical social workers with insurance companies; promotion and advancement in ethical standards; a regular newsletter; promotion and advocacy of students and new professionals in clinical practice; and other forms of professional networking and promotion. For more information please read the information you receive in the mail as part of the membership process.

Please complete information below:

Name _____ Title / Degree _____

Preferred Mailing Address _____ City _____ Zip _____

Preferred Phone _____ Email _____
(please print legibly)

Business Address _____ City _____ Zip _____
(if different from above)

Business Phone _____ Website _____
(if different from above)

Practice Specialties: __Adult __Adolescents __Children __Couples __Family __Group __Geriatric __Medical __
Other (specify):

Modalities used (ie hypnosis, DBT, EMDR, etc):

Groups:

How did you hear about the NCSCSW? _____

Would you like to be contacted to serve on a committee, project, or be considered for Board position? Y N

1. I would like to receive emails from the society YES NO (provide address on email line - pg 1)
2. I would like to be included in a hardcopy edition directory YES NO

Full \$ 100.00 Transitional (LCSW-P) \$ 75.00 Student / retired / unemployed \$ 35.00

For FULL members:

Yes, I am currently licensed as an LCSW in North Carolina. If not, please explain:

For TRANSITIONAL members:

I am currently licensed as an LCSW-P in North Carolina. If not, please explain:

You may elect to send a resume or curriculum vitae in lieu of the following information:

EDUCATION (Name of university, major, degree and year graduated)

CLINICAL TRAINING (Field work, internships, etc.) List name of organization, dates, and supervisor.

PROFESSIONAL EXPERIENCE / EMPLOYMENT (after training)

List name of organization, type of work, dates, hours, and supervisor.

TEACHING EXPERIENCE AND/OR PUBLICATIONS

PROFESSIONAL AFFILIATIONS (include offices held)

I affirm to the best of my knowledge that the information provided is true, correct and complete. I further declare that I have never been convicted on malpractice and am not currently under investigation of charges of malpractice. A part of my membership I agree to sign a statement that I will abide by the NCSCSW Code of Ethics and Adjudication Procedures outlined by the Society.

Print name: _____ Signature: _____

Date: _____

Please mail to NCSCSW, PO Box 30006 Raleigh NC 27622-0006

Include:

1) application 2) a copy of your license and 3) a check to: NCSCSW

Congratulations on taking a progressive step by joining NCSCSW! We welcome your membership and value whatever contributions you make.