

NCSCSW Professional Scholarship Application



North Carolina Society for
Clinical Social Work
ADVOCACY - EDUCATION - SUPPORT

Contact Information

Name	
Street Address	
City ST ZIP Code	
Phone Number	
E-Mail Address	

Please provide your answers to these two questions in the form of a 1-3 page written statement, or in another medium such as a video submission.

1. Clinical Experience and Involvement

The NCSCSW Professional Scholarship is awarded to current clinicians (LCSW and LCSWA) who demonstrate a commitment to reducing behavioral health disparities and improving behavioral health-care outcomes for underserved populations. Please describe your experience related to this commitment.

2. How Will The Award Be Used?

Please describe how you would use this award to further your commitment to reducing behavioral health disparities and improving behavioral health-care outcomes for underserved populations?

Reference Information

Please provide the contact information for one reference who can speak to your commitment to reducing behavioral health disparities and improving behavioral health-care outcomes for underserved populations. By providing this information you are agreeing to allow the scholarship committee to contact this person on your behalf.

Name	
Preferred Phone Number	
E-Mail Address	
Relationship	

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. By signing below, I give my permission for my statements, whether written, video, or some other medium, to be used by NCSCSW in its marketing or other communications, including its website.

Name (printed)	
Signature	
Date	

Evaluation Policy

It is the policy of the NCSCSW to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Eligibility

All clinical social workers (LCSW and LCSWA) in good standing and currently practicing in the state of North Carolina are eligible to apply for this scholarship.

Submission Process

Submit your application by sending all of the above information to “treasurer@ncscsw.org”. Thank you for completing this application and for your interest in the NCSCSW Scholarship Program.