

CASW/BMS Scholarship Fund Application

General Information

- The CASW in partnership with BMS and the NLCSW offers scholarships to assist social workers to attend educational events which align with the mission and purpose of CASW, uphold the values of the CASW Code of Ethics and meet the criteria established by the NLCSW Continuing Professional Education (CPE) Policy.
- Dependent on the pool of applicants, one scholarship valued at \$1500 or two scholarships valued at \$750 each will be awarded to eligible applicants in September each year.
- The deadline for receipt of applications is September 16 each year.
- The successful recipient(s) will be selected by lottery of qualified applicants.
- All applicants will be notified of the outcome of their application within 30 days of the applicable deadline.

Eligibility Criteria

- Registered social workers in good standing with the NLCSW are eligible to apply to the CASW/BMS Scholarship Fund.
- The scholarship will not be awarded to the same individual more than once every five years.
- Expenses must equal or exceed \$750 to be considered eligible.
- The scholarship will be available to registered social workers attending conferences or workshops as defined by the NLCSW CPE Policy.
- The educational event must occur within the same fiscal year as the application deadline. The fiscal year runs from March 1 – February 28.
- Applicants must notify NLCSW if they have received funding from another source. Events fully funded by another source (e.g. employer) are not eligible.
- Applicants must indicate how the educational event will advance their social work practice, highlighting the knowledge and skills which will be acquired.

Application Submission

- The completed application form and attachment(s) can be submitted to the NLCSW office by:
Mail: NLCSW PO Box 39039 St. John's, NL A1E 5Y7
Email: info@nlcsw.ca OR Fax: (709) 753-0120

CASW/BMS Scholarship Fund Application

Name & NLCSW Registration Number

Mailing Address

Email Address

Event Details

Name and Description of Event: **(A link to the web address or a copy of the official document/brochure outlining the event must be included with the application)**

Date of Event: _____

How will this event advance your social work practice? Please highlight the knowledge and skills you hope to acquire. _____

Please outline expenses related to the event:

Expenses	Total
Fees (registration, tuition, etc.)	
Supplementary Materials	
Travel/Accommodations	
Other (please specify):	
Total Expenses	

Have you received financial assistance for this request from any other source? Yes No
If yes, please state how much assistance will be provided? _____

Member's Signature: _____ Date _____