

Application for

Louise Mullican Memorial Scholarship

Administered by the Tennessee Association of School Social
Workers

Section I.

Applicant's Name: _____

Mailing Address: _____

Telephone: Home _____ Work _____ Cell _____

Social Security Number: _____

Please list all colleges attended (include name(s) of institution(s), date(s) of attendance, and degree(s) received):

College or university where scholarship will be used: _____

Section II.

Describe present or previous work experience in a social work setting. Volunteer experience may be included. Please specify setting, length of experience(s), hours worked and responsibilities.

Section III.

Describe past and/or future field placements.

Section IV.

List one personal reference and two professional references including name, address, title, complete mailing address and telephone number.

Reference pages are attached. Please give one page to each reference. Upon completion, the references will give you their sealed referrals. Please include this form and all three references in one envelope and mail by 9/8/17 to:

**Shelonda Phillips-McDonald
8130 Green Belt Drive
Memphis, TN 38125
phillipsmcdonaldsf@scsk12.org**

Personal Reference:

Name: _____

Address: _____

Capacity in Which You know this reference: _____

Telephone: _____

Professional References:

Name: _____

Address: _____

Title: _____ Telephone: _____

Name: _____

Address: _____

Title: _____ Telephone: _____

Section V.

Describe your plans/goals for the future. Include how this scholarship could help you to achieve those goals, and why you decided to make school social work your vocation.

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This person has applied for a scholarship from TASSW. After completion, please give sealed recommendation to the student to complete their application.

Applicant's Name: _____

Years Known: _____

In What Capacity? _____

Please write a short paragraph indicating this applicant's strengths and weaknesses.

Your recommendation of this candidate:

Excellent _____ Above Average _____ Average _____ Questionable _____

Signature Title Date