



Texas A&M University-Central Texas

Student Association of Social Workers (SASW)

Membership Application

Vision Statement

To create and maintain professional Social Workers, as a network, to build knowledge and experience by contributing to the community in a selfless manner.

Mission Statement

The Student Association of Social Workers (SASW) is a network of past and present student Social Workers who serve the community through volunteerism and advocacy to enhance the dignity and worth of each person while promoting social justice. We strive to build knowledge, integrity, and experience to be competent and reputable Social Work professionals while fostering the importance of human relationships through support and guidance to all current and past Social Work students.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Other Phone: _____

Email Address: _____

Birthday: _____ (month) _____ (day)

Would you like your birthday acknowledged by SASW (for example: announcement during meetings, in emails, etc)?

Please Check One: Yes No

Current Student Status (please check one): Junior Senior Expected Graduation Date: _____ (month) _____ (year)

Please indicate your academic focus in social work: (please check one) Social Work **Major** Social Work **Minor**

Have you been admitted, or are you seeking admission, into the Social Work Program (please check one)? Yes No

Please read the following and, if you agree, acknowledge agreement by signing and dating in the appropriate space below.

Statement of Organizational Membership Requirements & Status

By signing below, I understand that I am applying for membership to the Student Association of Social Workers (SASW). I understand membership requires: 1) completion of an application, 2) payment of one-time, non-refundable, membership dues of \$25.00, and 3) a major or minor in Social Work at TAMU-CT. I also understand that active membership in the organization requires: 1) attending at least one (1) organizational meeting in the spring and fall semesters per academic year and 2) donation of time, services or other resources to at least one (1) organizational activity (to include meetings) in a semester. I understand that failure to adhere to the above active membership requirements may result in my status becoming listed as inactive. I further understand inactive status means I would be unable to vote in organizational matters and may not be recognized at organizational events (e.g., annual Social Work Banquet).

Student Signature: _____

Date: ____/____/____

Lifetime Membership Dues: \$25.00 (please make check out to SASW)

Received By: _____ Date: ____/____/____ Ck# ____/Cash/Other _____

Amended: 9/23/14