

MINNESOTA STATE UNIVERSITY
moorhead

• SCHOOL OF SOCIAL WORK •

Pre-Screening Faculty Application

Application Date

Applicant Name

Last First M.I.

Present Mailing Address

Position Applied For

Position Number

POST-SECONDARY DEGREES EARNED (USE ANOTHER PAGE AS NEEDED)

Institution	City, State	Dates Attended	Date	Specialty

POST-MSW SOCIAL WORK EXPERIENCE (USE ANOTHER PAGE AS NEEDED)

Institution	Position	Dates	%FTE	Total Months ¹

TOTAL NUMBER OF MONTHS¹ OF POST-MSW SOCIAL WORK EXPERIENCE _____

¹ Please round up or down to the nearest month (e.g., {≤ 0.49} = round down; {≥ 0.50} round up)

COLLEGE AND UNIVERSITY TEACHING EXPERIENCE (USE ANOTHER PAGE AS NEEDED)

Institution	Position	Dates	%FTE	Total Months ¹

TOTAL NUMBER OF MONTHS¹ OF COLLEGE AND UNIVERSITY TEACHING EXPERIENCE _____

COMMUNITY SERVICE (USE ANOTHER PAGE AS NEEDED)

Institution	Position	Dates	%FTE	Total Months ¹

TOTAL NUMBER OF MONTHS¹ OF COMMUNITY SERVICE _____

¹ Please round up or down to the nearest month (e.g., {≤ 0.49} = round down; {≥ 0.50} round up)