

CalSWEC Title IV-E Stipend Program Application  
California State University, Bakersfield

The CalSWEC Title IV-E Program offers financial assistance to MSW students through two options:

- Full-Time Option
  - Available to students who are not employed by a public child welfare agency during the MSW Program.
  - Provides a stipend of \$25,000 per year.
- Part-Time Option
  - Available to students who are employed throughout the MSW program by a public child welfare agency in California, typically a County Child Welfare Department.
  - Provides reimbursement for tuition, books, and travel expenses up to a specified limit.

**Program Obligation:** All participants are required to work in public child welfare, usually in a County Child Welfare Department, for two years. Advanced Standing students have a one-year obligation.

**Application Instructions:** Please complete this application if you are interested in applying for financial assistance through the CalSWEC Title IV-E Program. **All applicants applying to the CalSWEC Title IV-E Stipend Program** must upload copies of the documents listed below through Cal State Apply. Applicants should combine all copies into one document (with multiple pages) and upload that one document to the Program Application Form document type in Cal State Apply. Each document required for the CalSWEC Title IV-E Stipend Application should be on its own page. Do not combine items (like copies of driver's licenses and vehicle registrations) onto the same page. Here are the documents and order in which they should be combined prior to upload.

Page 1 – Completed CalSWEC Title IV-E Stipend Program Application (this form)

Page 2 – A one-page statement expressing interest in working in public child welfare (include relevant academic, volunteer, or work experience)

Page 3 – Copy of proof of legal residency. Provide a copy of any **one** of the following:

- birth certificate
- US Passport
- US Permanent Resident Card

Page 4 – Copy of valid driver's license

Page 5 – Copy of valid vehicle registration (for the vehicle you will use during your practicum)

Page 6 – Copy of valid vehicle insurance (for the vehicle you will use during your practicum)

**Also required for applicants to the part-time program:**

Page 7 – Employer letter of support which meets the CalSWEC requirements (their designated program director)

**\*\*\*Please ensure all documents are submitted by the application deadline. Incomplete applications will impact consideration. \*\*\*\***

Contact the Department of Social Work with any questions regarding required documents at [mswadmissions@csub.edu](mailto:mswadmissions@csub.edu).

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**Application for Financial Assistance**

Please complete this supplement to apply for financial assistance from the CalSWEC Title IV-E Program.

**Personal Information**

Full Name: \_\_\_\_\_

**Permanent Address (Notifications will be sent after spring graduation):**

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Email address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

School GPA: \_\_\_\_\_

**CalSWEC Program**

Assistance you are applying for (Must match the program selected on the MSW Application):

\_\_\_\_\_

**Citizenship Information**

Are you a U.S. Citizen? \_\_\_\_\_

If no, please specify: \_\_\_\_\_

**Ethnicity**

How would you describe your ethnicity? \_\_\_\_\_

If other, please specify: \_\_\_\_\_

**Work Experience**

Do you have experience working in public child welfare? \_\_\_\_\_

If yes, please provide the following details.

Dates of Employment: Agency Name, Job Title below:

\_\_\_\_\_

**Internship Placement Preferences**

*Full-time students are required to complete their concentration year internship at a PUBLIC child welfare agency. Please indicate your county placement preferences (1 = most preferred, 2 = less preferred, etc.). Note: this does not guarantee placement in a specific county. If no other county placements are available, students should be prepared to complete their internship in Kern County.*

Kern County: \_\_\_\_

Tulare County: \_\_\_\_

Kings County: \_\_\_\_

Los Angeles County: \_\_\_\_

Other County (please specify): \_\_\_\_\_

**Part-Time Applicants**

*Part-time students are required to work for the agency with which they are currently employed.*

Which county do you work for? \_\_\_\_\_

**Driver's License and Legal History**

Do you have a valid California Driver's License? \_\_\_\_\_

If no, please explain: \_\_\_\_\_

Have you ever been convicted of a crime involving harm to children? \_\_\_\_\_

If yes, please specify: \_\_\_\_\_

Have you ever been convicted of a misdemeanor or felony? \_\_\_\_\_

If yes, please specify: \_\_\_\_\_

## **Obligations of CalSWEC Recipients**

By applying for financial assistance, you agree to the following obligations:

- Enroll in prescribed courses, including child welfare electives.
- Maintain continuous enrollment in the MSW program and complete it within the agreed timeframe.
- Maintain a minimum GPA of 3.0 in all coursework.
- Participate in CalSWEC activities and complete required field placements.
- Maintain a valid California driver's license and access to a legally operable vehicle while enrolled in an internship.
- Hold automobile insurance while in the MSW program.
- Honor the post-graduation work commitment as per the program contract.
- Maintain professional liability insurance while in the MSW program.
- Disclose any prior or subsequent convictions that would disqualify you from employment at a public child welfare agency in California.

## **Certification and Signature**

I certify that the information I have provided in this application is accurate. I understand that the CalSWEC program is designed to recruit social workers to serve in Public Child Welfare Services in California. I commit to fulfilling my obligation to secure employment in Public Child Welfare Services upon graduation. I acknowledge that CalSWEC assistance is taxable income and understand my responsibilities as a recipient of this program.

Signature:

Date: