

395 SOUTH 1500 EAST, ROOM 101 • SALT LAKE CITY, UTAH 84112-0260 • (801) 581-6192 • Fax (801) 585-3219 • WWW.SOCWK.UTAH.EDU

Case Management Certificate Program (CMC) 2023-2024 Deadline for Applications: May 22, 2023 Notification of Admission/Denial: June 23, 2023

APPLICATION DOCUMENTS & PROCESS

You will send 1 email with 4 files attached to cswcminfo@utah.edu

Files to include in the email:

- 1. Application Form
 - *Save the application as YOURLASTNAME_APPLICATIONFORM.PDF
- 2. Letter of Recommendation
 - *Save the letter of recommendation as YOURLASTNAME_LETTER.PDF
- 3. Personal Statement
 - *Save the personal statement as YOURLASTNAME_PERSONALSTATEMENT.PDF
- 4. Resume
 - *Save the resume as YOURLASTNAME RESUME.PDF

| 1. Applicati Date of appl | | | | | |
|----------------------------|---------------|-------------------|-------------------|----------------|--|
| First Name: | | | Last Name: | | |
| Name as it a | ppears on yo | ur official docun | nents: | | |
| Gender: Date of Birth: Day | | | Month | Year | |
| Language/s | spoken: | | | | |
| | | | | | |
| Current Ad | ldress and L | ocation – Please | complete all the | parts: | |
| Street Name | (with number | er): | | | |
| City: | | | | | |
| State/Provin | ce: | | | | |
| Zip Code: | | | | | |
| Country: | | | | | |
| | | | | | |
| Phone num | ber: | | | | |
| (Check the o | ones that you | can use for com | munication during | this program.) | |
| | | | | | |
| | | | | | |
| Call | Text | WHATSAPP | | | |



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| Will you be enrolled in another college or university program during the time of this program? |
|--|
| (If so, please name): |
| Do you have daily access to a computer/internet to do assignments and readings? |
| Yes No |
| Do you have a space and the support needed to do weekly assignments and submit them online? Yes No |
| All courses are taught in English. Do you have a High School level of English to read materials and write papers? |
| Yes No |
| Additional Information: |
| University of Utah Status: Are you currently a University of Utah Student or have you received a University ID number in the past? If so, what is your uID? |
| |

2. Letter of Recommendation:

Please submit a letter of recommendation with this application from an individual (i.e., employer, coworker, community member, instructor, or another professional), who can discuss why you are a good candidate for the Case Management Certificate Program and the potential for your success.

3. Personal Statement:

*One 2–3-page personal statement (typed, double-spaced, 12-point font) describing interest in case management. Use the following questions to guide your statement:

- 1) How did you hear about the program?
- 2) What is your motivation for acquiring this certificate and how will this training contribute to the community you live in?



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- 3) What are your past education experiences?
- 4) What are the skills and strengths that you will bring to the program?
- 5) What do you think your challenges will be with attending and completing this program and how will you handle them?
- 6) Please state your firm commitment to completing the program.
- 7) Do you require any special accommodations or assistance, if yes, please explain?

*Please be sure to address all the questions in your personal statement.

4. One page Resume: a summary of your education and/or work experience

If you have any questions or concerns, please reach out to cswcminfo@utah.edu