

Social Worker Education Capacity Expansion Program Technical Assistance Guide

Department of Health Care Access and Information

March 2024

Background and Mission

The Department of Health Care Access and Information (HCAI) administers health workforce programs, including the Social Work Education Capacity Expansion (SWECE) Grant Program. This program originated as part of the Children and Youth Behavioral Health Initiative enacted in AB 133 (Chapter 143 of 2021) started in Fiscal Year 2021-22. These workforce programs promote the expansion of postsecondary education and training to meet behavioral health workforce needs.

This grant opportunity will result in grant agreement(s) with educational institutions to expand existing Master of Social Work (MSW) programs and to develop new Bachelor of Arts in Social Work (BASW)/Bachelor of Social Work (BSW) as well as to expand MSW programs that educate and prepare additional MSW students who will provide behavioral health services, including services to children and youth through age 25. These activities would include capacity to:

- Work on multidisciplinary teams
- Work with underserved groups
- Reflect SWECE guiding principles in coursework and field placements

Application Release Dates

Application release: February 23, 2024

Application deadline: April 8, 2024

Applications open and close at 3:00 pm

Before You Apply

- If your program requires approval to contract from a coordinating authority, inform the authority of terms and conditions contained in the Grant Agreement.
- Applicants must agree to the terms and conditions before receiving funds.
- HCAI **will not** make changes to the terms and conditions specified in the Grant Agreement.
- Funding shall not be used for any other purpose than creating a New or Expanding an existing SWECE Program
- Funds shall not supplant existing state or local funds
- Training sites must be located in California

Information to Gather

- Correct organization name (incorrect information can delay the agreement process)
- Grant Agreement and Payee Data record (STD-204) signatories
- Organization information for where SWECE students are trained, this includes addresses and quantities
- A description of Tasks

Available Funding

- Approximately \$20,000,000 in state funding is available to support Social Work Education Capacity Expansion programs.
- BSW/BASW New Programs will not be funded with this cycle of funds.

Helpful Resources

- [2023-24 Social Work Education Capacity Expansion \(SWECE\) Grant Guide](#)
- [SWECE Online Application](#)

Creating an Account

CA
GOV

Newsroom Public Meetings About HCAI Subscribe Careers SIGN IN Create Account

HCAi Search ...

Building Safety & Finance Loan Repayments, Scholarships & Grants Healthcare Workforce Data & Reports Facility Finder

Sign in Create Account Redeem invitation

Password must be at least 8 characters long and include at least one upper and lowercase letter, a number (0-9), and a special character (such as !@#%\$).

Register for a new local account

* Email

* Password

* Confirm password

PW52yDS
[Generate a new image](#)
[Play the audio code](#)

Enter the code from the image

Create Account

If you are a new applicant, click “Create Account”

Setting up Your Profile

Profile



My Security Settings

Change Password

Change Email

Select your user type. (Choose all that apply) *

- Healthcare Professional
- Student
- Organization for seismic construction funding
- Organization for healthcare workforce support
- Organization for small rural hospital improvement

Submit

Check the “Organization for healthcare workforce support”. After checking that box, you will immediately be presented with additional options.

Completing Your Profile

Profile

Select your user type. (Choose all that apply) *

Organization for healthcare workforce support

Are you applying for Song Brown Programs?

No Yes

Are you applying for other Grants Programs (Health Professions Career Opportunity & Behavioral Health Programs)?

No Yes

Please select all that apply.

Peer Personnel Training and Placement Program

Health Careers Exploration Program (HCEP)

Health Professions Pathways Program (HPPP)

Justice and System Involved Youth (JSIY)

Psychiatry Education Capacity Expansion (PECE)

Social Work Education Capacity Expansion (SWECE)

Wellness Coach Employer Support (WCES)

Select an organization from the search list below.

Prefix

First Name *

Middle Initial

Last Name *

Suffix

Title

Degree *

Phone 1 *

Phone 2

1. Click "No" to are you applying for a Song-Brown Programs?
2. Click "Yes" to are you applying for other Grant Programs?
3. Please check the SWECE Training and Placement Program box.
4. Please **ignore** this box for selecting an organization.
5. Please provide your name and contact information.

Assigning Other Users

Assign Other Users

The screenshot shows a user profile page for 'ZzzJaneZzz ZzzDoeZzz'. The left sidebar contains navigation options: Profile, Assign Other Users (highlighted with a blue arrow), My Security Settings, Change password, and Change email. The main content area features a notification: 'Your email requires confirmation' with a 'Confirm Email' button. Below this is a blue 'Add User' button, also highlighted with a blue arrow. Underneath is a table header with columns: Full Name ↑, Organization, Applicant Role, E-mail, Phone, and Degree. A yellow message box below the table states 'There are no records to display.'

1. If you want to add an additional grant preparer(s), please ask them to log into eAPP and create their own profile(s).
2. As a Program Director you have an additional tab on your "Profile" page called "Assign Other Users".
3. Click the "Add User" button and you will get a pop-up screen with a list. Search for your grant preparer's name to give them access to your application.

Note: Only Program Director's can start, or submit an application

Apply Here

The screenshot shows the top navigation bar of the HCAi system. On the left is the HCAi logo. To its right is a dark blue navigation menu with five items: 'Apply Here', 'WCES Applications - In Progress/Submitted', 'ECE Applications', 'PEER Applications - In Progress/Submitted', and 'Grant Applications'. The 'Apply Here' item is highlighted in a lighter blue. Above the navigation bar is a user profile section with the text 'Profile', 'Assign Other Users', and 'Sign Out', followed by a user ID 'ZZZGOODZZZ ZZZGUYSSZZ' in a rounded rectangle.

1. After you receive confirmation that you have been made a Program Director, log in again.
2. Navigate to the “Apply Here” page on the main menu.
3. Select the “Social Work Education Capacity Expansion Grant Program 2024” link and click the “Apply” button when you are ready to begin.

Open grant applications matching your Profile are displayed below. To find additional applications, please change the applicable user types in your Profile. To find applications already started or submitted, go to the Applications In Progress/Submitted tab.

Program	Release Date	Due Date	Who Can Apply
Peer Personnel Training and Placement Program 2024	01/02/2024 3:00 PM	03/01/2024 3:00 PM	Organization
Psychiatry Education Capacity Expansion Grant Program 2024	12/18/2023 8:00 AM	01/06/2024 8:00 AM	Organization
Social Work Education Capacity Expansion Grant Program 2024	12/18/2023 8:00 AM	01/15/2024 8:00 AM	Organization
Wellness Coach Employer Support Grant Program 2024	01/16/2024 3:00 PM	03/15/2024 3:00 PM	Organization

Apply Here (continued)

CA Gov
HCAI

Apply Here

Open grant applications mat submitted, go to the Applicat

Program

Peer Personnel Training an

Psychiatry Education Capa

Social Work Education Cap

Wellness Coach Employer

Services

Submit Data

Loan Repayment Programs

Scholarships

Grants

Penalty Appeals

Profile Sign

View details

Application Release Date

12/18/2023 8:00 AM

Close Date

02/07/2024 8:00 AM

Only Program Directors are allowed to Initiate a PECE application. To request to be a Program Director please contact us at BHPPrograms@HCAI.ca.gov.

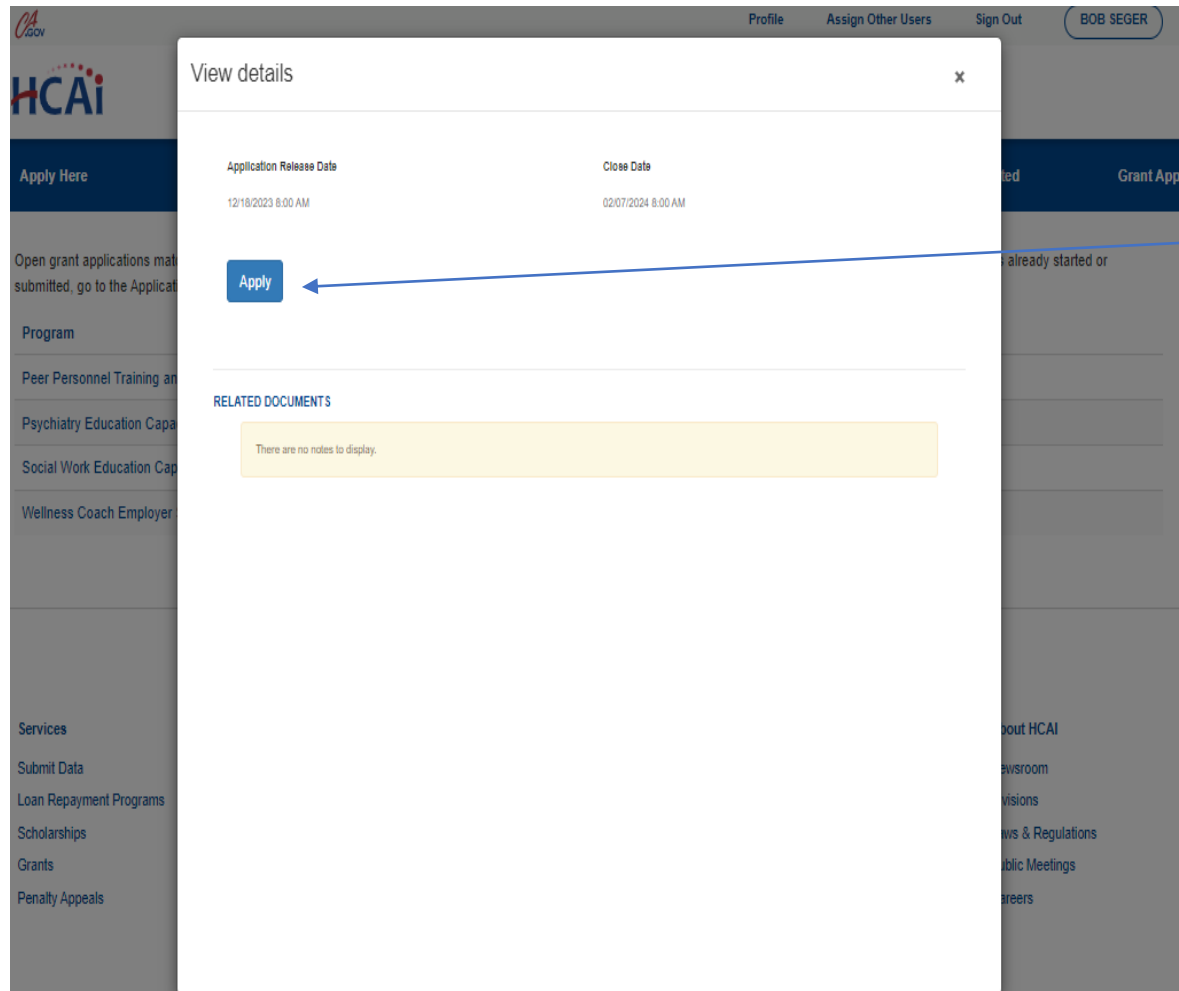
RELATED DOCUMENTS

There are no notes to display.

1. All newly created accounts are automatically assigned the role of “Grant Preparer”. Only Program Directors may start or submit an application.
2. If you are the Program Director, email BHPPrograms@HCAI.ca.gov and Dustin.Bridges@hcai.ca.gov to request the “Program Director” role.
3. Once HCAI staff approves your request you will receive a follow-up email confirming the approval.

Note: Program Directors may initiate, view, edit, submit applications, payment certifications and Final Reports. Grant Preparers are limited to viewing, editing applications, and submitting payment certifications.

Apply Here (continued)



1. After you have reached out to HCAI to be made a Program Director, you will need to log in again to your profile.
2. Once in your profile, then you may begin your application by clicking “Apply”.

Note: Program Directors may initiate, view, edit, submit applications, payment certifications and Final Reports. Grant Preparers are limited to viewing, editing applications, and submitting payment certifications.

Helpful Tips

Asterisks *

The red asterisks indicate which fields require a response before proceeding to the next page.

Training Program Title *

Tooltips

Throughout the application you may see a blue circle with a question mark at the end of a question, title, or sentence. Click on these icons for additional information.

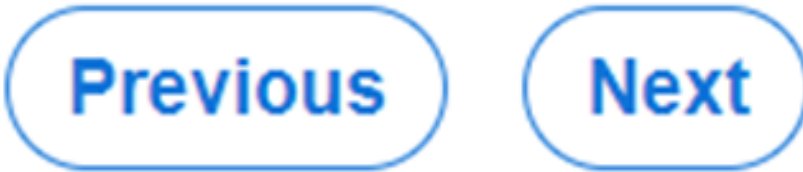
The last name of the primary contact at the contract organization.

Contract Administrator Last Name * 

Helpful Tips (continued)

Navigating the application

Use the “Previous” and “Save & Next” buttons found at the bottom left of each page.



Saving your application

Each time you click “Save & Next” in the application your progress is saved. Navigate to the “Applications-In Progress/Submitted” page to resume your application.

The screenshot shows the HCAi application interface. At the top is the HCAi logo. Below it is a navigation bar with five tabs: 'Apply Here', 'Applications - In Progress/Submitted', 'Awards', 'Payments & Deliverables', and 'Messages'. The 'Applications - In Progress/Submitted' tab is selected. Below the navigation bar is a table with the following columns: 'Grant Application Number ↑', 'Training Program', 'Initiated By', 'Program Type', 'Status', 'Program', 'Application Due Date', 'Modification Due Date', and 'SBPCR New Program'. The table contains one row of data:

Grant Application Number ↑	Training Program	Initiated By	Program Type	Status	Program	Application Due Date	Modification Due Date	SBPCR New Program
		Buck Rogers		In Progress	Peer Personnel Training and Placement Program 2023	03/30/2023 3:00 PM		No <input type="checkbox"/>

Starting a Masters in Social Work (MSW) “Expanding Existing Program” Application

Program Information

Application - Social Worker Education Capacity Expansion

Program Information

Organization

Program Director Program Director Email

On behalf of which type of program are you applying? Master of Social Work (MSW) Bachelor of Arts in Social Work (BASW)/ Bachelor of Social Work (BSW)

Please provide the program name *

Are you establishing a new program or expanding existing program? Establishing New program Expanding Existing program

Can you provide a copy of your accreditation letter from CSWE? * No Yes

Can you provide a Sustainability Letter? * No Yes

Select a Social Work program from the Social Work Program Title search list below. If the social work program is not listed, check the Social Work Program not listed checkbox to add the program's information.

Social Work Program Title *

Social Work Program not listed *

Executive summary. Please describe the education and training offerings for students seeking an MSW including an estimate of the percent of students likely to be interested in securing licensure after receiving their MSW. Please describe the geographic areas in California and demographics of communities in which your field placements are located. Maximum of 1,000 characters.

1. Your program information will pre-populate with data you entered in your "Profile" page
2. Please select Master of Social Work (MSW)
3. Add your Program Name here.
4. Please select Expanding Existing Program.
5. Please answer the Eligibility questions.
6. This is the first cycle in eAPP, your program will not be on the list, please choose "Training Program Not Listed"
7. Please provide a brief description of your program.

Contract Administration

Contract Administration

Contract Organization Name

Please select the type of entity Governmental Entity Non-Governmental Entity

Doing Business As

Prefix Contract Administrator First Name Contract Administrator Last Name

Title

Phone1 Phone2

Contract Administrator Email

Grant Agreement Signatory

First Name Last Name Phone

Email

Is the Payee Data Record (STD 204) Signatory the same as the Grant Agreement Signatory? No Yes

Payee Data Record (STD 204) Signatory

First Name Last Name Phone Number

Email

The legal address for your organization must match the address on file with the IRS.

Is the legal address for your organization a PO box? No Yes

Should payments be sent to a different address than what is on file with the IRS? No Yes

1. Contract Organization Name” must match what you report to the Internal Revenue Service.
2. Answer if you are a Government or Non-Government entity.
3. “Grant Agreement Signatory” must be an individual with authority to enter into a grant agreement.
4. “STD. 204 Signatory” name must be an authorized signatory.

Note: Verify this information with your finance or contracts office to ensure this information is correct. Providing incorrect information will delay your grant agreement should you be awarded.

New: PO box option is available for the 204 category.

Program Data

Application SWECE-0001029 – Social Worker Education Capacity Expansion

10%

Program Data

Do you have a BASW/BSW Program? *

No Yes

Do you offer advanced standing to BSW/BASW students? *

No Yes

Instructions: Enter the data in each field for each year shown. If no data for a year, enter '0'

How many new first-year MSW students will you enroll each academic year? *

2024-2025	2025-2026	2026-2027	2027-2028
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

How many MSW students did you enroll in the program in each of the following academic years? *

2020-2021	2021-2022	2022-2023
<input type="text"/>	<input type="text"/>	<input type="text"/>

What percent of graduates do you estimate secured clinical licensure between 2016 and 2019?*

Please answer these questions.

1. Answer the BASW/BSW Program Question.
2. Answer the advanced standing Question
3. How many first year MSW students do you plan to have?
4. How many first year MSW students did you have in previous years?
5. Answer what percent of graduates secured clinical licensure between 2016 and 2019.

When complete, click “Save and Next”.

Please Note: After saving, you can leave and return later to continue working on your application.

Placement Site(s)

Application SWECE-0001029 – Social Worker Education Capacity Expansion

20%

Placement Site(s)

How many active second year field placement sites does/will your program use in your MSW program? *

Click on the Add Placement Site button to add new placement site.

Add Site

Field Placement Site Name	Street Address	Suite/Dept	City	State	Zip Code	County
There are no records to display.						

Please answer these questions.

1. How many active “second year” field placement sites will your MSW program have?
2. Click Add Site button.

When complete, click “Save and Next”.

Please Note: After saving, you can leave and return later to continue working on your application.

Placement Site(s) (continued)

Final Year Field Placement Site: 1 of 1

Field Placement Site Name *

Is the placement site part of Public Mental Health system (PMHS)?*
 No Yes

+ Select Address

Street Address *

Suite/Dept

City

State

Zip Code

Please answer these questions.

This is what the pop-up box looks like when you click “Add Site”.

1. What is your Field Placement Site Name?
2. Answer Yes/No to Public Mental Health System Question.
3. Click Select Address and enter address and search button.

When complete, click “Save and Next”.

Please Note: After saving, you can leave and return later to continue working on your application.

Placement Site(s) (continued)

Create

How many students are placed at this site each year (on average)?

1

Please select the Agency Type.

- Child welfare agency
 - Community-based behavioral health provider
- Community Health Centers
 - Corrections facility
- Government behavioral health provider
 - Government medical/health care provider
- Medi-Cal Managed Care plan
 - Private school
- Public or Charter school
 - Residential facility
- None of the above

Submit

Please answer these questions.

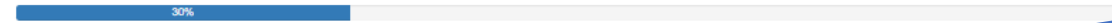
1. Enter how many students at each site
2. Select all that apply for “Agency Type”.

When complete, click “Submit”.

Please Note: After saving, you can leave and return later to continue working on your application.

Proposed New Student Enrollment

Application SWECE-0001029 – Social Worker Education Capacity Expansion



Proposed New Student Enrollment

You may apply for funding for up to 25 additional first year students for each of academic years 2024-25, 2025-26, 2026-27, 2027-28 and 2028-29

How many additional first year full-time/part-time students will you enroll in each of the following years?

2024-25 *	<input type="text" value="0"/>
2025-26 *	<input type="text" value="0"/>
2026-27 *	<input type="text" value="0"/>
2027-28 *	<input type="text" value="0"/>

How many additional first year online only students will you enroll in each of the following years?

2024-25 *	<input type="text" value="0"/>
2025-26 *	<input type="text" value="0"/>
2026-27 *	<input type="text" value="0"/>
2027-28 *	<input type="text" value="0"/>

Please answer these questions.

1. **Note:** You may apply for funding for up to 25 additional first year students.
2. Submit how many additional first year students you will enroll in each of the following years.
3. Submit how many additional first year students you will enroll online in each of the following years.

When complete, click “Save and Next”.

Please Note: After saving, you can leave and return later to continue working on your application.

Proposed New Student Enrollment (continued)

How many additional advanced standing students will you enroll in each of the following years?

2024-25	<input type="text" value="0"/>
2025-26	<input type="text" value="0"/>
2026-27	<input type="text" value="0"/>
2027-28	<input type="text" value="0"/>
2028-29	<input type="text" value="0"/>
Total additional first year students for 2024-25	<input type="text" value="0"/>
Total additional first year students for 2025-26	<input type="text" value="0"/>
Total additional first year students for 2026-27	<input type="text" value="0"/>
Total additional first year students for 2027-28	<input type="text" value="0"/>
Total additional first year students for 2028-29	<input type="text" value="0"/>

Please answer these questions.

1. Submit how many additional advanced standing students you will enroll in each of the following years.
2. Check totals for “additional first year students” for each year.

When complete, click “Save and Next”.

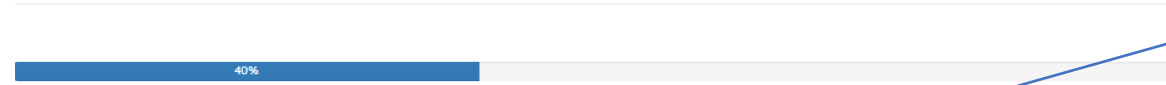
Please Note: After saving, you can leave and return later to continue working on your application.

[Previous](#)

[Save & Next](#)

Budget/Funding Page

Application SWECE-0001029 – Social Worker Education Capacity Expansion



Budget/Funding

Please be sure that your budget totals do not exceed:
\$70,000 per full-time/part-time student
\$40,000 per student for online only education
\$40,000 advanced standing

Total Full-Time/Part-Time Students

100

Total Online only Students

0

Total Advanced Standing Students

0

Total Additional Students

100

Total Allowed Funding

7,000,000

Please complete the proposed budget assuming you receive SWECE funding. Please be certain that the columns' total matches the grant amount you are requesting. To add budget categories, click on the **Add Budget** button and enter the required information. To edit information or delete a budget category, click on the Options button next to a budget line item and select Edit or Delete.

Add Budget

Please Review and Add Budget.

1. Total Students enrolled.
2. Total “Allowed Funding”. All budget categories and indirect costs will have to equal this total amount.
3. Click “Add Budget” button. Add your budget details.

Budget/Funding Page (continued)

Create

Please select the Budget Category

Please select an item in this list

Instructions: Based on the Budget Category selected above, enter the amount for each of the following Fiscal Years.

2024-2025

2025-2026

2026-2027

2027-2028

2028-2029

Submit

Please answer these questions.

1. Select and complete all Budget Categories
2. Be sure to complete all the categories even if your answer is \$0.
3. Once complete click "Submit" button

Student Demographics Page 1 of 2

Application SWECE-0001029 – Social Worker Education Capacity Expansion

Please answer these questions.



Student Demographics Page 1 of 2

We are collecting information about your student demographics for current year.

Please enter the number of students currently enrolled in the MSW program. *

Please enter the number of current students who speak the following languages fluently/well enough to be able to provide direct care services to clients.

Any Indigenous and/or Tribal Language *

Any form of Sign Communication *

Arabic *

Armenian *

Cambodian *

Chinese *

Farsi *

Hindi *

Hmong *

Japanese *

Korean *

1. Enter the number of students currently enrolled in the MSW program
2. Enter the number of current students who speak the following languages fluently.
3. **Note:** the number of students speaking these respective languages can be zero.

Student Demographics Page 1 of 2 (continued)

Laotian *	<input type="text" value="0"/>
Mien *	<input type="text" value="0"/>
Punjabi *	<input type="text" value="0"/>
Russian *	<input type="text" value="0"/>
Spanish *	<input type="text" value="0"/>
Tagalog *	<input type="text" value="0"/>
Thai *	<input type="text" value="0"/>
Vietnamese *	<input type="text" value="0"/>
Ukrainian *	<input type="text" value="0"/>
Total	<input type="text" value="0"/>

Please answer these questions.

1. Enter the number of current students who speak the following languages fluently.
2. **Note:** the number of students speaking these respective languages can be zero.

[Previous](#)

[Save & Next](#)

Student Demographics Page 2 of 2

Application SWECE-0001029 – Social Worker Education Capacity Expansion

Please answer these questions.

1. **Note:** Information collect for Student Demographics for 2020-2023.
2. Click “Add Data” button

80%

Student Demographics Page 2 of 2

We are collecting information about your student demographics for years 2020 - 2023.

The following demographic questions will only be used for reporting and analysis purposes.HCAI will not share your individual responses with any third party and will only disclose demographic information collected in response to these questions in aggregate or as may be required by applicable law, including the California Public Records Act.

California and Federal law(including the Information Practices Act of 1977, Government Code Section 11015.5., and the federal Privacy Act of 1974) requires departments to maintain the confidentiality of this data and only allows release in aggregate form that cannot be used to identify an individual.HCAI adheres to all applicable security and privacy standards.For more information about HCAI's Privacy Policy, please visit HCAI's website: <https://hcai.ca.gov/home/privacy-policy/>

While you are not required to respond to these questions, your answers will help us to evaluate the effectiveness of HCAI programs in recruiting a diverse and culturally competent health care workforce.

Provide the race and ethnicity of your students, by graduating years, for years 2020-2023 by clicking on "Add Data" button

Add Data

Graduating in Academic Year	Ethnicity Total	Race Total
There are no records to display.		

[Previous](#) [Save & Next](#)

Student Demographics Page 2 of 2 (continued)

Please answer these questions.

1. Please select the “Academic Year” for all years that apply.
2. Based on “Academic Year”, enter Race and Ethnicity data for each that apply.

Please select the Academic Year *

2021/22

Instructions: Based on the Academic Year selected above, enter the data for each of the following:

Hispanic or Latino

0

Non-Hispanic or Latino

0

Unknown

0

Total

0

Instructions: Based on the Academic Year selected above, enter the data for each of the following:

American Indian or Alaska Native

0

Asian

0

Black or African American

0

Student Demographics Page 2 of 2 (continued)

Native Hawaiian or Other Pacific Islander

White

Multiracial

Other Race

Unknown

Total

Please answer these questions.

1. Based on “Academic Year”, enter Race and Ethnicity data for each that apply.
2. Once complete click “Save & Next” button.

Submit

Recruitment and Other Strategies

Application SWECE-0001029 – Social Worker Education Capacity Expansion



Recruitment and Other Strategies

Please select the strategies you will use to recruit and support students from underrepresented communities. Select all that apply.*

- Use data to identify underrepresented groups
- Participate in pipeline programs development
- Promote middle school, high school, and undergraduate students to regularly participate in mentoring activities
- Provide career outreach to junior high/high schools and/or participate in career fairs in underserved communities
- None of the above

Do you offer resources to promote student success? Select all that apply.*

- Tutoring/academic support
- Mentoring resources
- Basic needs (food, housing childcare, transportation supports)
- Psychological Supports (e.g., affinity groups, student counseling)
- None of the above

Please select the program strategies you will use to encourage your graduates to provide services in areas of unmet need. Select all that apply.*

- Select students based on strong interest to provide clinical services in areas of unmet need
- Prioritize students coming from underserved communities
- Set up marketing and outreach programs to recruit students who have interest in providing clinical services in underserved communities
- Encourage students to commit to clinical practice in a community with unmet needs
- Offer incentives to students who commit to providing clinical services in underserved communities
- Recruit field placements agencies serving areas with unmet need
- Provide employment assistance leading to employment in underserved areas
- None of the above

Please select the strategies you will incorporate to implement culturally responsive care training into the program's curriculum. Select all that apply.*

- Hire faculty and/or lecturers who come from similar cultural backgrounds as the communities served
- Hire bilingual faculty, lecturers and/or staff
- Provide students annual training in cultural competency education
- Teach professionalism that incorporates multi-cultural social etiquette and/or norms of behavior
- Offer non-curricular activities that incorporate various culturally diverse celebratory traditions
- Provide training for students (in coursework, field placement) on anti-racism, unconscious bias, diversity, equity, inclusion, belonging, and/or accessibility
- None of the above

Previous

Save & Next

Please answer these questions.

1. How do you recruit and support residents from underrepresented communities?
2. How do you encourage student success?
3. How do you encourage your residents to practice in areas of unmet need?
4. How do you implement culturally responsive care training?

When complete, click “Save and Next”.

Please Note: After saving, you can leave and return later to continue working on your application.

Required Documents

Application SWECE-0001024 – Social Worker Education Capacity Expansion

80%

Required Documents

CSWE Accreditation Letter

Please attach proof that you have applied for, or acquired CSWE accreditation letter.

CSWE Letter Upload ✓ 1 file uploaded, 1 file required.*

Filename must start with LtrCSWE_ to be accepted. Example: LtrCSWE_MyDocument

Name ↑	Modified	
LtrCSWE_MyDocument.docx (188 KB)	02/28/2024 2:30 PM	▼
LtrSus_MyDocument.docx (188 KB)	02/02/2024 11:44 AM	▼

Letter of Sustainability

Please upload a letter of sustainability from the university describing plans to provide operational funding to support the expanded MSW program when this grant funding ends. Please refer SWECE Grant guide to see an example of Sustainability Letter.

Sustainability Letter Upload ✓ 1 file uploaded, 1 file required.*

Filename must start with LtrSus_ to be accepted. Example: LtrSus_MyDocument

Please Upload the required documents.

1. Upload CSWE Accreditation Letter. Filename must start with LtrCSWE_ to be accepted. Example: LtrCSWE_MyDocument
2. Upload Letter of Sustainability. Filename must start with LtrSus_ to be accepted. Example: LtrSus_MyDocument

Please Note: Each file name must begin with the indicated wording, or you will not be able to complete the upload.

Previous

Save & Next

Assurances

Application SWECE-0001024 – Social Worker Education Capacity Expansion



Assurances

I, the applicant, certify that the information provided in this application is true and accurate to the best of my knowledge.

I Certify *

Previous

Submit

- Last page. When you are fully satisfied that your application has been filled out correctly, check the certify box.
- **Please note: When you click the “Submit” button you are done. You will not be allowed to make any further edits.**

Viewing & Printing Your Application



1. Once you submit your application you can view and print your application by selecting the “ECE Applications” button.

Education Capacity Expansion Programs



2. Then select the “SWECE Application” button.

Viewing & Printing Your Application (continued)

Once you submit your application you can view and print your application by selecting the Options dropdown on the “Application-In Progress/Submitted” page

SWECE Application View - In-progress/Submitted

Application Number ↓	Initiated By	Application Status	Cycles	Due Date (Cycles)	Modification Due Date (Cycles)
SWECE-0001029	Justin Tucker	Submitted	Social Work Education Capacity Expansion Grant Program 2024	02/16/2024 8:00 AM	<input type="checkbox"/> Delete View/Print

Common Application Errors

- Applicant did not reconcile the organization participant counts based on what they had initially input.
- Applicants do not provide the correct contract organization name.
- Applicant did not reconcile their budget against their total request for funds.
- Applicants do not provide the correct Grantee and 204 Signatories.

Questions?

BHPrograms@HCAI.ca.gov

Dustin.Bridges@hcai.ca.gov