



## Program Description

Welcome to the Social Worker Education Capacity Expansion (SWECE) Grant Program. The purpose of the SWECE Grant Program is to fund institutions and organizations to increase the number of Social Workers serving in California, especially those serving children and youth. This program offers funding for: expanding capacity for an existing Master of Social Work (MSW) program, establishing a new Master of Social Work (MSW) program, and establishing a new Bachelor of Arts in Social Work (BASW) program

This is the Application for: **Establishing a new Master of Social Work (MSW) program**

Click here to apply for: [Expanding capacity for an existing Master of Social Work \(MSW\) program](#)

Click here to apply for: [Establishing a new Bachelor of Arts in Social Work \(BASW\) program](#)

**Before you begin the application, please review the [PDF version](#) of the application, to ensure you have all materials ready and available. We recommend that you complete the application in one session.**

Please provide the program name:

Please provide the address for the program:

Street Address Line 1

Street Address Line 2

City

State

Zip Code

Are you the dean or director for this program?

☐ Yes

☐ No

Please provide the contact information for the dean or program director.

First Name

Last Name:

Title:

Phone Number (xxx-xxx-xxxx)

Email Address

Please provide your contact information.

First Name

Last Name:

Title:

Phone Number (xxx-xxx-xxxx)

Email Address

Please describe the need for establishing a MSW program at your university. Please describe the geographic areas and demographics of the communities in which the school and satellites (if any) are located.  
(maximum 1,000 words)

Word count: 0

## Misc

Do you have a BASW Program?

- ☐ Yes
- ☐ No

## MSW New

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

In what year will you enroll your first cohort of MSW students?

## Recruitment Strategies 1

Please select the strategies you will use to recruit and support students from underrepresented communities. (select all that apply):

- ☐ Program will use data to identify underrepresented groups
- ☐ Program will use pipeline/recruitment programs
- ☐ Students will assist junior high/high schools focused around social work career opportunities in underserved communities
- ☐ Program will require students to regularly participate in mentoring activities
- ☐ None of the above

Do you offer resources to promote student success, such as (select all that apply):

- ☐ Tutoring services with peers and/or campus-based resources
- ☐ Mentoring with peers and/or behavioral health professionals from diverse backgrounds
- ☐ Comprehensive support services
- ☐ Other, please describe
- ☐ None of the above

You indicated that you offer Comprehensive support services to promote student success. Please describe.

You indicated that you offer other resources to promote student success.

Please describe.

Please select the program strategies you will use to encourage your graduates to provide clinical services in areas of unmet need. (select all that apply):

- ☐ Students will be selected based on strong interest to provide clinical services in areas of unmet need
- ☐ The program will prioritize students coming from underserved communities
- ☐ The program plans to set up marketing and outreach programs to recruit students who have interest in providing clinical services in underserved communities
- ☐ The program will require students to commit to clinical practice in a community with unmet needs
- ☐ The program will offer incentives to students who commit to providing clinical services in underserved communities.
- ☐ Other
- ☐ None of the above

You indicated that you will use Other strategies to encourage your students to practice in areas of unmet need.

Please describe.

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 lecturers who come from similar cultural backgrounds as the communities served
- ☐ Hire bilingual faculty, lecturers and staff who speak the geographical areas' key languages

- ☐ Provide students annual training in cultural competency education
- ☐ Teach professionalism that incorporates multi-cultural social etiquette and norms of behavior
- ☐ Offer non-curricular activities that incorporate various culturally diverse celebratory traditions
- ☐ Other
- ☐ None of the above

You indicated that you will use Other strategies to implement culturally responsive care training into the program’s curriculum.

Please describe.

Misc 2

Please upload a letter from the university describing plans to provide operational funding to support the new BASW program / MSW program once it is accredited by the Council on Social Work Education (CSWE).

Budget Block

Proposed Budget

Please complete the proposed budget table below, assuming you receive SWECE funding. Please be certain that the columns' total matches the grant amount you are requesting.

Please be sure that your total funding request, the sum of all three years, does not exceed \$1,500,000

	FY 2022-23	FY 2023-24	FY 2024-25
Program Personnel	\$ <input type="text" value="0"/>	\$ <input type="text" value="0"/>	\$ <input type="text" value="0"/>
Faculty	\$ <input type="text" value="0"/>	\$ <input type="text" value="0"/>	\$ <input type="text" value="0"/>

	FY 2022-23	FY 2023-24	FY 2024-25
CSWE fees/expenses	\$ <input type="text" value="0"/>	\$ <input type="text" value="0"/>	\$ <input type="text" value="0"/>
Other Costs	\$ <input type="text" value="0"/>	\$ <input type="text" value="0"/>	\$ <input type="text" value="0"/>
#Conjoint, Total#	\$ <input type="text" value="0"/>	\$ <input type="text" value="0"/>	\$ <input type="text" value="0"/>

Please be sure that your total funding request, the sum of all three years, does not exceed \$1,500,000. You can click the back arrows to adjust your entries.

**WARNING:** If your total funding request exceeds \$1,500,000 and you click the forward arrow, you will need to start your application over.

Total Funding Request:  
\$0

Cancel Budget

You have exceeded the maximum budget request. Please click the forward arrow to re-take this application.

Other Budget

You indicated that you are requesting funding for:  
Other Costs

Please describe these costs.

Signature Block

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

Please type your first and last name in the box below. By clicking the "Next" button, you are submitting your application

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