



2009 MEMBERSHIP APPLICATION FORM

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Email: info@sswr.org
Website: www.sswr.org

MEMBERSHIP STATUS (check one): Renewing Member (ID Number: _____) New Member

MEMBERSHIP INFORMATION:

Full Name (first, MI, last): _____

Position/Title: _____

Employer, Institution, Organization: _____

Division/Department: _____

Mailing Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____

Country: _____

Phone: _____ Fax: _____

Email Address: _____

Highest Degree:

- | | |
|-------------------------------|---------------------------------------|
| <input type="checkbox"/> PhD | <input type="checkbox"/> MSW |
| <input type="checkbox"/> DSW | <input type="checkbox"/> MPH |
| <input type="checkbox"/> MD | <input type="checkbox"/> MEd |
| <input type="checkbox"/> ScD | <input type="checkbox"/> MPP |
| <input type="checkbox"/> DrPH | <input type="checkbox"/> MPA |
| <input type="checkbox"/> EdD | <input type="checkbox"/> BA/BS |
| <input type="checkbox"/> JD | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> MS | |
| <input type="checkbox"/> MA | |

Granting Institution:

Date of Degree:

Career Level: Student Post-Doctoral Fellow First Yr. Professional Early Career Mid Career Senior Other

PREFERENCES:

May we post your contact information in the SSWR website membership directory? Yes No

May we distribute your contact information to be used by non-SSWR parties? Yes No

**This optional information assists SSWR in obtaining grants and awards.*

*Gender: Male Female

*Ethnicity: Black, African American Spanish, Hispanic, Latino
 White, Caucasian, European American Indian, Native American
 Asian, Pacific Islander Other _____

MEMBERSHIP CATEGORIES AND ANNUAL DUES (check one): SSWR membership year is from January 1st through December 31st.

\$100 Full Member (Open to individuals with a bachelor's, master's, or doctoral degree in social work or social welfare; or social work/social welfare faculty teaching in such degree programs)

\$50 Student Member (Full-time students in bachelor's, master's, or doctoral programs in social work or social welfare.)

Please indicate below your degree program and your expected year of completion.

Degree program (check one): Bachelor's Master's Doctoral Postdoc Fellow

Expected Date of Completion: _____ (mm/yyyy)

\$100 Associate Member (Open to individuals that are not otherwise eligible for Full or Student membership.)

\$50 Emeritus Member (Open to individuals who have been continuous members of the Society for at least five years and are retired from their primary place of employment, and who make a written request to the Society for Emeritus status)

JOURNAL SUBSCRIPTION CHOICE

SSWR members may select one journal subscription for the 2008 membership year.

Please indicate your choice.

Research on Social Work Practice (Sage Publications), print version

Social Service Review (University of Chicago Press), print and electronic versions

PAYMENT METHOD:

Check (Please make your check payable to SSWR and return this invoice in the enclosed envelope to the address above.)

Credit Card Payment VISA MasterCard

Account Number: _____

Expiration Date: _____

Name on Card: _____

Signature: _____

Type of Organization Affiliation (check all that apply)

- College or University
- For-profit organization
- Government agency or organization
- Private Practice/Consultant
- Non-profit research center not affiliated with a university
- Other (please specify) _____

Occupational Type (check all that apply)

- Academic Faculty
- Researcher
- Practitioner
- Policy Maker
- Administrator

Current Research Topics of Interests (check all that apply)

- Adolescent Delinquency
- Adolescent Health and Mental Health
- Adolescent Substance Abuse
- Adolescent Violence
- African Americans
- Aging
- Alcohol Abuse
- Caregiving
- Child Welfare
- Criminal Justice System
- Cultural Competence
- Depression
- Disability
- Domestic Violence
- Drug Use/Abuse
- Early Childhood/Infancy
- End-of-Life/Palliative Care
- Ethical Issues
- Ethnic Minority Groups
- Evidence-Based Practice
- Foster Care
- Gay, Lesbian, Bisexual, Transgender (GLBT)

- Gender Issues
- HIV/AIDS
- Health and Illness (Cancer, Diabetes, et al.)
- Homelessness and Housing
- Immigrants
- International Social Work
- Intervention Research
- Mental Health Treatment and Services
- Parenting and Families
- Poverty
- Serious Mental Illness
- Social Policy
- Social Work Education
- Social Work Practice
- Social Work Research and Scholarship
- Spirituality
- Theory
- Violence in Communities
- Welfare Reform
- Women's Issues
- Other (please specify) _____

Current Research Methods/Types (check all that apply)

- Qualitative Methods – Grounded Theory
- Qualitative Methods – Ethnography
- Qualitative Methods – Case Study
- Qualitative Methods – Narrative
- Qualitative Methods – Phenomenological
- Mixed Methods (qualitative-quantitative)
- Systematic Review (e.g., meta-analysis)
- Pilot Study
- Program Evaluation
- Longitudinal Design
- Experimental/RCT
- Quasi-Experimental
- Descriptive/Correlational
- Time Series (includes single-system design)
- Survey
- Psychometric/Instrumentation Study
- Ecological Analysis (e.g., GIS/mapping)
- Advanced Statistical Analysis (HLM, SEM, etc.)
- Other (please specify) _____

Current Sources of Funding for Research in Which You Are Principal or Co-Principal Investigator

- Federal Agency
- State Agency
- Local Government Agency
- Foundation
- Other Private Source
- Own Agency
- Other (please specify) _____

Are you a member in other Social Work-related organizations?

- NASW (National Association of Social Workers)
- CSWE (Council on Social Work Education)
- NADD (National Association of Deans and Directors)
- BPD (Baccalaureate Program Directors)
- GADE (Group for the Advancement of Doctoral Education)
- Other (please specify) _____