

CheckList

Name of Applicant: _____

Date Submitted: _____

- MSW - College of Social Work Graduate Year _____
(copy of transcript)

Non-OSU/CSW Graduate: Social Work Program _____
Year _____ (copy of transcript)

- Field Practicum (Indicate school district) _____
- Work experience in school (Identify) _____ From _____ to _____

If working in a school (minimum one year):
****Please supply a letter on School stationary with dates of employment**

- Social Work License (Provide copy) expiration date _____
- Additional Post Master's Course Work/Training (List) _____

- Completion of the **Initial Ohio Five-Year License** application
- Money Order or Check (**\$60.00**) payable to "Ohio T.E.C"
- Submitted Ohio background check (\$15.00) payable to "Treasurer State of Ohio"
- Submitted FBI fingerprint check if applicant has not lived continuously in Ohio for the past five years (\$24.00) payable to "Treasurer State of Ohio"
The applicant is responsible for mailing the fingerprint card(s) to BCI.
DO NOT FOLD THE CARD(S).