Eastern Washington University
Masters in Social Work Student Association
Membership Form

“The good we secure for ourselves is precarious and uncertain, is floating in mid-air, until it is secured for all of us and incorporated into our common life.” –Jane Addams

Name: ______________________________________________________________ Date: ______________

Year in Program: ___ First Year    ___ Second Year

Preferred Location for Meetings: ____ Cheney   ___ Riverpoint

Preferred Email Address: ________________________________________________________________

Please Share Past Experiences with:

Leadership: ________________________________________________________________

Community Service: ______________________________________________________________

Outreach: ________________________________________________________________

Ideas for Future Activities/Outreach/Service:

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Please return to: Dr. Cindy Nover cnover@ewu.edu or Dr. Deborah Svoboda dsvoboda@ewu.edu

208 Senior Hall Cheney, WA 99004