

NEW EDUCATOR PREPARATION PROGRAM PLANNING
NOTIFICATION OF INTENT
FORM 1

Program Information

Program Name: PRO CERT - SOCIAL WORKERS
Institution Name: School of Work - University of Washington
Degree Granting/Certification Unit: College of Ed / School of Social Work
(e.g. College of Education)
Degree or Certification Only: Certificates Only
Level: ESA Professional Certification: Indicate Role School Social Work
(e.g. Master's, Professional Certification)
Endorsement(s) (for Teacher Preparation): Not applicable
Proposed Start Date: Jan-09
Projected Enrollment (FTE) in Year One: 7 Projected Full Enrollment: 2010: 10
(#FTE) (year) (#FTE)

Mode of Delivery/Locations

Single Campus Delivery _____
(enter locations)
 Off-site _____
(enter locations)
 Distance Learning _____
(enter formats)

Contact Information (Academic Department Representative)

Name: MARGARET SPEARMAN
Title: ASSOCIATE DECN
Address: School of Work - 4101 15th Ave NE, Seattle, WA.
Telephone: 206-616-2516
Fax: 206-221-3910
Email: Spearmann@u.washington.edu

Margaret Spearman
Endorsement by Chief Academic Officer

Date 4-8-08