

Hunter College of the City University of New York - Office of the Registrar
DEGREE AUDIT APPLICATION FORM (DAAF)
Master of Social Work – BANK STREET DUAL DEGREE PROGRAM—51 Credits

Last _____ First _____ Middle _____
Name on diploma will be printed as it appears on academic transcript.

ID No - - Telephone Home () _____ Work () _____

Last semester of attendance (FILL IN YEAR) Summer _____ Fall _____ Spring _____

- PLEASE PRINT LEGIBLY IN **BLUE OR BLACK INK ONLY.**
- **INCOMPLETE DAAFS WILL BE RETURNED TO THE STUDENT.**
- **THE BOARD OF HIGHER EDUCATION STIPULATES THAT YOU MUST BE REGISTERED FOR THE SEMESTER IN WHICH YOU GRADUATE. IF YOU ARE NOT REGISTERED FOR ANY COURSES YOU MUST REGISTER FOR MAINTENANCE OF MATRICULATION (MAM) AT THE OASIS. THERE ARE ABSOLUTELY NO WAIVERS OF THIS REQUIREMENT. CONSULT THE OFFICE OF THE BURSAR FOR TUITION AND FEE INFORMATION.**
- **IF YOU HAVE ANY GRADES ON APPEAL, YOU MUST NOTIFY THE DEGREE AUDIT DIVISION BEFORE THE DATE OF GRADUATION.**
- **NO CHANGES TO YOUR RECORD WILL BE MADE AFTER GRADUATION HAS BEEN POSTED.**
- **IF YOUR GRADUATION IS CANCELLED, YOU MUST REAPPLY AND SUBMIT A NEW DAAF, SIGNED BY YOUR MAJOR ADVISOR(S) IN THE BEGINNING OF THE SEMESTER IN WHICH YOU WILL HAVE MET DEGREE REQUIREMENTS. SEE ACADEMIC CALENDAR FOR DEADLINES.**

List All Courses Not Being Used Toward Degree

Course Prefix & Number	Course Title	Credits	Semester (Circle One)	Year Taken
			Fall Spring Summer	
			Fall Spring Summer	
			Fall Spring Summer	

Courses used to meet Admissions Condition(s)

Course Prefix & Number	Course Title	Credits	Semester (Circle One)	Year Taken
			Fall Spring Summer	
			Fall Spring Summer	
			Fall Spring Summer	

I certify that the student mentioned herein, upon successful completion of the courses listed on the reverse, will have satisfied the departmental requirements and is recommended for the degree of Master of Social Work.

Chair/Advisor Signature _____ Date _____
Chair/Advisor Name (Please Print) _____
E-mail address _____

Department Stamp

THIS AUDIT IS NOT OFFICIAL UNTIL APPROVED BY THE OFFICE OF THE REGISTRAR, DEGREE AUDIT DIVISION.

Student Signature _____ Date _____

Please Turn Over And Complete Specialization Section

Course Prefix & Number	Course Title	Credits	Semester (Circle One)			Year Taken
SSW 701.00	Social Welfare Policy and Services	3.0	Fall	Spring	Summer	
SSW 780.00	Administration of Social Agencies	3.0	Fall	Spring	Summer	
SSW 719.00	Foundations to Social Work Practice	2.0	Fall	Spring	Summer	
SSW 721.00	Social Casework I	2.0	Fall	Spring	Summer	
OR						
SSW 731.00	Group Work II	2.0	Fall	Spring	Summer	
SSW 751.00	Research I	3.0	Fall	Spring	Summer	
SSW 767.00	Field Practicum at Hunter	9.0	Fall	Spring	Summer	
SSW 722.00	Casework II	3.0	Fall	Spring	Summer	
OR						
SSW 732.00	Group Work II	3.0	Fall	Spring	Summer	
SSW 712.00	Human Behavior and Social Environment II	2.0	Fall	Spring	Summer	
SSW 725.00	Casework I for Non-majors	2.0	Fall	Spring	Summer	
OR						
SSW 735.00	Group Work for Non-majors	2.0	Fall	Spring	Summer	
SSW 768.00	Field Practicum with Hunter	10.0	Fall	Spring	Summer	
SSW 702.00	Social Welfare Policy and Services II	2.0	Fall	Spring	Summer	
SSW 794.00	Family Treatment	2.0	Fall	Spring	Summer	
SSW 723.00	Social Casework III	3.0	Fall	Spring	Summer	
OR						
SSW 733.00	Group Work III	3.0	Fall	Spring	Summer	
SSW 713.00	Human Behavior and Social Environment III	2.0	Fall	Spring	Summer	
SSW 790.00	Professional Seminar	3.0	Fall	Spring	Summer	

******* A SEPARATE MEMORANDUM FOR ANY LANGUAGE EXAMS, COMPREHENSIVE EXAMS, PROOF OF THESIS COMPLETION, WAIVERS, EXEMPTIONS AND/OR SUBSTITUTIONS OF REQUIRED COURSES MUST BE SUBMITTED TO THE RECORDS DIVISION, IN ROOM 217 HUNTER NORTH. *******

* * * * * **For Office Use Only** * * * * *

Credits required	51	Admissions Condition		GPA index (must be 3.0 or above)	
Credits in progress		Non-matric credits (under B)		Incomplete letter sent (Initials & Date)	
Thesis/Project	N/A	Condition credits		Eligible to graduate if current term completed (Initials & Date)	
Comprehensive Exam	N/A	Out of Date credits		Degree Posted (Initials & Date)	
Language Exam	N/A	Undergraduate credits		Graduation Term	
Professional Teaching Portfolio	N/A	Other credits		Graduation Date	