

MSW Collaborative Specialization in Addiction Studies (CoPAS)

Addiction practicum is a CoPAS Requirement

Submit completed application & cv/resume to (e.mckee@utoronto.ca)

1. **Name:** _____
2. **Student Number:** _____
3. **Current Address:** _____

4. **Email Address (utoronto):** _____
5. **Phone Number:** Current: _____
Home (permanent): _____
6. **Summary of Academic Background and Interests (please attach resume):**

7. **Reasons for wanting to participate in CoPAS:**

8. **In which year do you plan to take the Core Course PAS 3700H?**
(offered in the Fall Term, Mondays from 2-4 PM)

9. **What CoPAS elective courses have you taken, or do you intend to take?**

Completed Electives	Dates	Intended Electives	Dates

10. **Other Relevant Information** (*if any*):

11. **Student's Signature:** _____
Date: _____

12. **Departmental Representative to CoPAS:** (By signing this form you are indicating that the student has met/intends to meet departmental requirements for participating in CoPAS)

Signed: _____
Name: _____
Department: _____ **Date:** _____

CoPAS Director's Signature: _____
Date: _____