



UNIVERSITY OF
ARKANSAS

J. William Fulbright
College of Arts & Sciences
School of Social Work

Social Work Action Group

Name: _____

Classification: _____

Phone Number: _____

Email: _____

What populations are you interested in working with? (Please check all that apply)

Domestic Violence

Elderly

Homeless

Public Schools

Substance Abuse

Other _____

What are you hoping to do while in SWAG?

Requirements for Membership:

- One-time dues of \$10
- Must attend at least two (2) meetings per semester
- Must have at least three (3) volunteer hours per semester

Applications may be submitted to Professor Whitney Payne via email at wwray@uark.edu or in the School of Social Work office, SCSW 106.