## FORM A: Supplemental Information Form for the Third Year of the Honours Bachelor of Social Work Program

A	applicant Information
Lakehead University Student ID Number	
Refer to your Acknowledgement Email, or your student portal.	
Full Legal Name (must match OUAC Application)	
Include your first, middle and last name.	
Chosen Name (if different from legal name)	
Date of Birth	
Current Mailing Address	
If you move after submitting your application, be sure to update your address on your OUAC account, and email the Social Work Office at social.work@lakeheadu.ca!	
Personal Email Address	
. o.co.ia. <u>-</u> i.i.a.i. / i.u.i. coc	
Phone Number(s)	
	Program Selection
I have applied to the <b>Thunder Bay Campus only</b> .	
I have applied to the Orillia Campus only.	
I have applied to <b>both Campuses</b> . The <b>Thunder Bay Campus is my first choice</b> .	
I have applied to both Cam	npuses. The Orillia Campus is my first choice.
I have applied for full-time a	admission.

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Personal Statement Arrangements		
	I understand that I will need 3.5 consecutive hours to complete the Personal Statement Exam online anytime between 9:00 am on January 24, 2025 and 5:00 pm on January 27, 2025.	
-	I have a diagnosed disability and require special accommodations for my Personal Statement Exam. I have included documentation from my home university/or a qualified practitioner clearly indicating any additional time needed to complete the exam.	
	Lakehead University students must include a copy of their Special Accommodations Form provided by Student Accessibility Services.	
Reference Information		
Reference 1		
Name		
Agency and Position		
Mailing Address		
Email Address		
Phone Number		
Reference 2		
Name		
Agency and Position		
Mailing Address		
Email Address		
Phone Number		

<sup>\*</sup>Please ensure that your legal name on the OUAC application matches the name on your reference forms