

Application Checklist:

- ☐ **Created an account/logged** into [Oregon BLSW Applicant Portal](#)
- ☐ Entered all **personal information** accurately
- ☐ **Education information** entered (BSW or MSW)
 - Official transcripts sent:
 - ☐ Email: oregon.blsw@blsw.oregon.gov
 - ☐ Mail: Oregon BLSW, 3218 Pringle Rd SE, Ste 240, Salem, OR 97302
- ☐ **Licensure History**
 - ☐ **No**, I have not held a professional license in another state or jurisdiction
 - ☐ **Yes**, I currently hold or have held a professional license in another state or jurisdiction
- Verification uploaded to application:** _____
- ☐ **Out of State Hours (If applicable)** See [Apply for a License](#) page for more information
- ☐ **Background Check**
 - ☐ Registered with [Fieldprint](#)
 - ☐ Used code: FPORSocialWorkersDAS
 - ☐ **Fingerprinting completed:** _____
- ☐ **Photo ID** Uploaded
- ☐ [Oregon Rules & Laws Exam](#) **answer sheet completed, signed, and uploaded**
- ☐ **Place(s) of Practice** entered
- ☐ **Supervision Plan (CSWA ONLY)** Entered
 - ☐ Emailed supervisor to approve plan: _____
- ☐ **National Exam** [ASWB Score transfer](#) requested: _____
 - ☐ Not yet taken or CSWA applicant
- ☐ **Declaration Questions** completed
 - ☐ Supporting documents uploaded for any questions you answered “yes”
- ☐ **Certifying Statement** Completed
- ☐ **Payment Submitted:** _____