

*North Dakota Board of Social Work Examiners*

PO Box 914 – Bismarck, ND 58502-0914

Telephone – 701-391-7005

Email: [info@ndboardofsocialwork.com](mailto:info@ndboardofsocialwork.com)

Website: [www.ndbswe.com](http://www.ndbswe.com)

**NDBSWE LIST REQUEST FORM**

The NDBSWE fee for a list of social workers is \$100. A request for a list must be accompanied by a check or money order made payable to NDBSWE.

Name of Person Requesting List: \_\_\_\_\_

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Purpose of the List (select only one):

Continuing Education  Employment Recruiting  Research  Other \_\_\_\_\_

License Level (select as many as applicable):

LBSW  LMSW  LCSW

License Status (select as many as applicable):

Active Licenses  Expired Licenses  Other \_\_\_\_\_

List order (select only one):

Alphabetical  License Number  Zip Code  Other \_\_\_\_\_

Format (select only one):

Tab delimited  Pipe delimited  Comma delimited  Excel  PDF

Note: All lists will be sent to the Email address above.

If you have questions, please contact the NDBSWE at [info@ndboardofsocialwork.com](mailto:info@ndboardofsocialwork.com)

**NDBSWE OFFICE USE ONLY**

File Name: \_\_\_\_\_

Date Sent: \_\_\_\_\_ NDBSWE Office : \_\_\_\_\_