NASW REQUEST FOR PROFESSIONAL REVIEW (RPR)

Self-Reporting Form

This form is to be completed by members for self-reporting. If applicable, please attach any relevant documents that outline the findings or any other supporting documentation to this request.

Note: Self-reports may be submitted even if they occur more than one year after the violation.

NAME:		
ADDRESS:		
<u> </u>		
HOME PHONE:	BUSINESS PHONE:	CELL PHONE:
SOURCE OF INFORMATION (f	or example, licensing board, court, em	ployer, or self report):
Please attach any relevant docu	ments.	
	at the time the violation occurred? If unsure submission.	e, please contact the Office of Ethics and Professional Review to
		d to this self-report, including the type of violation(s) and the <i>s</i> reported in the documentation you will be submitting.
The information and the supp	orting documentation provided in this RPR	are true to the best of my knowledge.
SIGNATURE:		DATE REQUEST FILLED:
Please forward this form, along		d Confidentiality Pledge/Statement of Understanding and a

National Ethics Committee National Association of Social Workers = 750 First Street, NE, Suite 800 = Washington, DC 20002