

**Manitoba Association of Social Workers  
Manitoba Institute of Registered Social Workers**

101 - 2033 Portage Ave., Winnipeg MB R3J 0K6  
Phone: 204-888-9477 Fax: 204-831-6359 Email: masw@mts.net

**Professional Consultation Committee  
Consultation Request Form**

Date: \_\_\_\_\_

Name (*Confidentiality will be maintained*): \_\_\_\_\_

Address: \_\_\_\_\_  
*Street City Postal Code*

\_\_\_\_\_  
*Phone Fax Email*

Area of Practice: \_\_\_\_\_

Number of years in practice: \_\_\_\_\_

I have consulted the CASW Code of Ethics: yes [  ] no [  ]

I have consulted the Standards of Practice: yes [  ] no [  ]

**PLEASE NOTE:**

In order to receive a response to this consultation request, you must be a member in good standing of the Manitoba Association of Social Workers and/or the Manitoba Institute of Registered Social Workers.

Also, the signed waiver form enclosed *must* accompany this request for consultation.

**Consultation #**



Consultation #

*Who else might be impacted by the consultation process?*

---

---

---

---

---

*Efforts made to resolve the dilemma, and outcomes of these efforts (Please include any consultation with other professionals):*

---

---

---

---

---

---

---

---

*List specific questions you would like to have the Consultation Team address:*

---

---

---

---

---

---

---

---

*What do you hope to achieve through the consultation process?*

---

---

---

---

---

---

---

---

*Please include any other pertinent information that you believe to be relevant to this consultation (attach extra sheets as necessary).*

Consultation #

**Manitoba Association of Social Workers  
Manitoba Institute of Registered Social Workers**

**WAIVER**

I have been advised and in exchange for receiving the consultation from the Professional Consultation Committee, I agree that any response to my questions to the Professional Consultation Committee of the Manitoba Association of Social Workers/Manitoba Institute of Registered Social Workers:

- (1) is provided to assist me to discharge my professional responsibilities;
- (2) is not, and is not to be taken as, legal advice;
- (3) is not in any way binding on the Manitoba Association of Social Workers/Manitoba Institute of Registered Social Workers or any of its committees; and
- (4) may not be relied upon or used by me in any legal proceeding or proceedings of the Manitoba Association of Social Workers/Manitoba Institute of Registered Social Workers or any of its committees.

\_\_\_\_\_  
*Name (please print)*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Witness*