GEORGE WILLIAMS COLLEGE OF
AURORA UNIVERSITY
SCHOOL OF SOCIAL WORK
FIELD APPLICATION: 2016/2017

INSTRUCTIONS: This form is to be completed by the student when there is an agreement with an agency about initiation of a field placement.

Submit form to:
Amy Ceshker, Coordinator of Field Instruction
350 Constance Blvd.
P.O. Box 210
Williams Bay, WI 53191
aceshker@gwc.aurora.edu

Application Deadlines:
May 1st - Summer Start (June)
August 1st - Fall Start (September)
December 1st – Spring Start (January)

**********PLEASE TYPE**********

Student _________________________________________________________________________________
Last    First    Phone (H/C)    (W)

Address _________________________________________________________________________________
Street      City    State  Zip

AU email _________________________________________________________________________________

Select One:  BSW:  □  450 hours

MSW:  □  Foundation/1st Placement (450 hrs)
      □  Advanced/2nd Placement (600 hrs)
      □  Post MSW/ IL. School SW (600 hrs)

*Eligibility determined by Dr. Fedota

FIELD PLACEMENT INFORMATION

( )

AGENCY/SCHOOL    DISTRICT #    AGENCY PHONE

STREET    CITY    STATE  ZIP
(MUST BE A STREET ADDRESS NOT A PO BOX)

Agency Field Instructor (MSW) ____________________________________________ Phone: (___)________

Field Instructor Email: ____________________________________________________

** For placements without MSW supervision available, please provide Task Supervisor information below. **

Agency Task Supervisor (non-MSW) ____________________________________________ Phone: (___)________

Task Supervisor Email: ____________________________________________________

Other personnel involved with field instruction on site: Name: ________________________________
Phone: ________________________________

Does this placement fulfill a requirement for a specialization area (Y/N)? Yes, which one?
___ Advanced Clinical ___ IL. School Social Work ___ Health Care Social Work

PLACEMENT BEGINS __________ ENDS __________ (please indicate semester/year). Are you requesting an early start? Please describe your request (include dates) ____________________________________________________________
Student Name

Previous Experience
Is this field placement your place of employment? Yes  No (if Yes- contact your field coordinator)

Reviewing your experience in the field of social work is essential to ensure your field placement will provide new social work learning experiences. Please attach a resume to this application. Please be advised that a second field placement with the same field agency is not permitted (see Field Manual for policy).

Advanced MSW Students, please list previous internship agency and social work employment agencies here:
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

Foundation MSW and BSW students: Have you worked within a social service organization serving a similar population as the placement you plan to complete this academic year? Yes  No

List areas of social work in which you have worked:
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

Schedule Commitment for Field Placement

Below please provide your plan for participating in your field placement. The plan should encompass your ability to secure 225 or 300 field hours each semester (on average 15 – 24 field hours weekly).

Mon: _____________________  Thurs: _____________________
Tues: _____________________  Fri: _____________________
Wed: _____________________  Sat: _____________________  Sun: _____________

____ Total weekly field hours  ______ Schedule to be determined at a later date
____ My Field Instructor has agreed to my planned schedule.

Field Interview Specifics

Please indicate which areas were discussed during your interview with chosen field placement.
____ Weekly- 1 hour individual supervision will be provided by MSW at placement.

____ Must you have a criminal background check?  ____ Who is responsible for securing this check?
____ Must you provide medical information?  ____ Must you provide proof of auto liability insurance?
____ Will you be responsible for transporting clients?  ____ Must you have specialized training?
____ Who is responsible for providing?  ____ Is there a cost?  ____ Who will pay?
____ Is training provided for personal safety issues, such as home visits, dealing with hostile clients, etc.?
____ Expectations about dress code were reviewed.  ____ Required paperwork reviewed.  ____ On call time required?
SPECIAL ISSUES OR CONCERNS - REQUIRED
Have you (student) ever been convicted of a **felony**? (Felony convictions: Criminal convictions that involve harming a child in any way, including physical and sexual assault; child endangerment; the death of a child; or causing bodily injury to a family member, partner, or other. Child Protective Services history that includes verification of any type of child abuse and/or neglect.)
If so, please explain:

Have you (student) ever been convicted of a **misdemeanor** involving domestic violence or the maltreatment of a child or an elderly person? If so, please explain:

List any languages (other than English) that you (student) speak **fluently**:

Does this placement involve any **conflict of interest** for the student or supervisor? (e.g. student received services as client of agency/supervisor, student’s family member employed at agency/school):

Minimum Responsibilities of the Agency Field Instructor (MSW or task supervisor at the agency/hospital/school designated as party responsible for training the social work student in the field):

1. Provide a minimum of one hour of supervision each week, providing guidance, training, processing, assignment and evaluation of social work field student.

2. Provide learning activities that allow the student to develop skills in 10 competency areas as defined by CSWE EPAS 2008. Students must have learning activities in each competency area.
   - 2.1.1 Identify as a professional social worker and conduct oneself accordingly.
   - 2.1.2 Apply social work ethical principles to guide professional practice
   - 2.1.3 Apply critical thinking to inform and communicate professional judgments
   - 2.1.4 Engage diversity and difference in practice
   - 2.1.5 Advance human rights and social and economic justice
   - 2.1.6 Engage in research-informed practice and practice-informed research
   - 2.1.7 Apply knowledge of human behavior and the social environment
   - 2.1.8 Engage in policy practice to advance social and economic well-being and to deliver effective social work services
   - 2.1.9 Respond to contexts that shape practice
   - 2.1.10 Engage, assess, intervene, and evaluate with individuals, families, groups, organizations and communities

3. Assist student in completing required field assignments (learning agreement, semester evaluations).
4. Assist student and field liaison in scheduling and facilitating field liaison visit (minimum of 1 visit each placement). Utilize field liaison for problem solving should the need arise.
5. Participate in George Williams College Field Instruction events as needed or available.
MINIMUM STUDENT RESPONSIBILITIES
Please read carefully and indicate awareness of responsibilities with your signature and date.

* I understand that the Field Manual is the “textbook” for my field placement. I also understand it is my responsibility to download and be familiar with this manual. This manual is located on George Williams College website. Additional forms and instructions will be indicated on Moodle page for this course.

* I understand that my field placement is for two consecutive semesters (unless otherwise arranged; School Social Work, Summer Block, Early Start). **If there are issues that arise which will effect my continued placement I will contact my Field Liaison or the Field Coordinator immediately.**

* I understand that I must complete a minimum of 225 or 300 (depending on level) field hours at the end of every semester in order to receive credit for each Field course. **I also understand that failure to submit my semester evaluations by the last day of finals will result in receiving no credit for my field experience and having to take the entire field class again, whenever it is offered.** This WILL prolong my academic involvement in school. (THIS STATEMENT DOES NOT APPLY TO MSW or POST MSW TYPE 73 STUDENTS IN SCHOOL SOCIAL WORK- IL. School Social Work students work within contract made with specific school district and evaluations are completed accordingly.)

* If I am a MSW student and my placement is in a school social work setting, the placement will end in late May or early June per the terms of the contract I have signed with the school district. I understand that I will participate in the George Williams College of Aurora University graduation ceremony in May, but my actual graduation date will be in the summer of that year.

* I understand that I must treat my field placement in a professional manner which will include, notification of absences or being late to my field instructor or agency/school supervisor, dressing in an appropriate manner for my placement, being knowledgeable about agency/school policies, etc.

* I understand that the field experience must span the entire academic year and may not be completed before the end of the academic year resulting in more than required Field hours being completed.

* I understand my responsibilities in cooperating with my assigned Field Liaison; this includes submitting my required monthly field hours, phone contacts, and coordinating and attending scheduled site visits.

* I understand that I am **not permitted to terminate the field placement** without notifying my Field Liaison or the Field Coordinator.

* I understand I may not begin my Field Placement hours until I receive a confirmation letter from the Field Coordinator.

________________________________________________________          __________
Student Signature          Date

________________________________________________________  ___________
MSW Field Instructor Supervisor Signature (required)     Date

NOTE: A PLACEMENT CANNOT BEGIN UNTIL THIS FORM IS COMPLETED BY STUDENT, SIGNED BY STUDENT/FIELD SUPERVISOR AND APPROVED BY THE FIELD COORDINATOR INCLUDING A CONFIRMATION NOTICE VIA E-MAIL
I verify that I have read the Aurora University School of Social Work Field Instruction Manual. I fully understand the policies, procedures, and guidelines included.

Student Name: ______________________________________________________

Student Signature: _________________________________________________

Date: ________________

Future Licensing Note for Wisconsin Social Workers:

Those students wishing to become licensed in Wisconsin should seek and choose a 600 hour, Advanced Placement that meets the Wisconsin Department of Safety and professional services criteria. See definition: Supervised clinical Field Training (MPSW 2.01 (17)) “Supervised clinical field training” means training in a primary clinical setting which must include at least 2 semesters of field placement where more than 50% of the practice is to assess and treat interpersonal and intrapsychic issues in direct contact with individuals, families or small groups as per Wisconsin Administrative Rule. The internship should include DSM diagnosis, therapy, and treatment planning and termination services. If your internship does not include the above criteria you will be expected to gain an additional 1500 post graduate hours equaling 4500 hours of supervised practice vs. 3000 hours should you meet the above criteria. It is recommended that you keep copies of your hours, internship activities along with your learning agreement, and evaluations all signed off by your MSW site supervisor. It is highly possible that during the application process for licensure that you will be asked to verify/prove your “supervised clinical field training”.

I verify that I have read and understand the above licensing note and recommendations.

Student name: ______________________________________________________

Student signature: _________________________________________________

Date: ________________