BSW & MSW Forms

NSU Request for Practicum Placement in an Agency of Employment

(Must	be typed)			
Student Name:	Banner #:			
Program: BSWMSW Foundation (1 st yea	ar) MSW Concentration	ion/ADV Standing		
Agency:				
Proposed or Current Agency Field Instructo	r:			
Name:	License #:	_ State:		
Position:	Date of Hire:			
Email:	Phone #:			
Degree & Level (i.e., BSW, MSW, other):				
Degree Date:University:				
Agency or Work Supervisor:				
Name/position:				
Agency Address:	City:	State:		
Description and Mission of Agency:				
Student Current Employee Status at Agency	(Circle One): Full-Time	Part-Time None		
Days performing work:	# Hour	s per day:		
Job Title:	Hire Date:			
Job Description (duties, function, client popula	tion served, etc.):			
Student's Current Supervisor (if required):				
Phone:	Email:			

Proposed Field Instruction Learning Objectives In an Agency of Employment

To ensure the role of student as learner, student assignments and field education supervision are not the same as those of the student's employment. A request for a *Practicum Placement in an Agency of Employment* requires students to develop a "mini" learning contract using the learning objectives and specific CSWE competencies detailed in NSU Practicum Manual (p. 5). For MSW students requesting a paid practicum, these learning activities will align with the program's specialization and will be different than normal job tasks.

NOTE: If the student is already placed in a practicum at the agency, then the information below will be a brief summary of the education contract. The purpose is to help faculty members differentiate the difference between job and practicum duties.

 List and describe *social work practice involvement and/or projects* that will be implemented at the agency. For students that are employed at an agency but not paid for the practicum, these projects should be *substantially different* from the tasks/assignments required under employee status or job function.

- 2. Develop a list of proposed *field instruction learning activities/tasks* (see CSWE Competencies for guidance): _____
- 3. Specify the days and times which will be set aside for the Job and Field Practicum each week during the semester. Please note also what day(s) you will be attending class.

	List Work Times	List Practicum Times
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

4. Describe how your current workload will be reduced to ensure that the required time for your Field Practicum is available each week.

5. **Paid Practicum Requests (MSW students only)**: The NSU Social Work Field Education program is designed to be solely educational and provide training to prepare the professional graduate level social worker. The intent of the field placement is to provide an educational foundation within an agency setting. For students completing field education in a paid practicum, it is imperative to differentiate and maintain division of obligations/duties as a student and employee. How will the agency distinguish the student's educational learning tasks evaluation and employment evaluation?

Signatures

By signing this Request for Practicum Placement in an Agency of Employment, you affirm that you have reviewed this request and the Guidelines for Field Practicum Placement at Agency Workplace, and hereby approve the same. Any misleading or falsified information on this form or during the Agency Workplace Practicum arrangement may lead to student and/or agency dismissal.

	Date:	
Printed Name		
Agency Administrative Supervisor Signature.		
	Date:	
Printed Name		
Proposed Agency Field Instructor Signature		
*Note: A minimum of one (1) hour of actual field practice	sticum instruction/supervision time per	

*Note: A minimum of one (1) hour of actual field practicum instruction/supervision time per week by a social worker is required per student in a field placement. This person is not the work supervisor.

Student: I am authorizing my employer/placement agency to release to the Northeastern State University Social Work Program information regarding my performance, if said performance results in termination, disciplinary action or employment suspension. The NSU Social Work Program may consider this information in rendering a decision about my continued participation in the field practicum course. I do hereby agree to hold such employers/agencies, references, persons, etc., harmless from liability for releasing said information.

Date:_____

Printed Name

Student

NORTHEASTERN STATE UNIVERSITY SOCIAL WORK PROGRAM FIELD PRACTICUM AGENCY DESCRIPTION

AGENCY NAME:
CITY: COUNTY:
MAILING ADDRESS:
STREET ADDRESS:
AGENCY WEBSITE:
TELEPHONE: ()
AGENCY DIRECTOR:
EMAIL AND TELEPHONE:
FIELD INSTRUCTOR:
FI POSITION IN AGENCY:
EMAIL AND TELEPHONE:
HIGHEST ACADEMIC DEGREE:
UNIVERSITY:LICENSURE (<i>if applicable</i>):YEAR:
YEARS OF EXPERIENCE: YEARS THIS POSITION:
OTHER CREDENTIALS:
SERVICES PROVIDED AND CLIENT DESCRIPTION:
DAYS STUDENT CAN ATTEND PRACTICUM:
Does the agency have any weekend, nights, or online practicum opportunities? If so please list:
IS STUDENT REQUIRED TO PROVIDE TRANSPORTATION:YESNO Is mileage paid by the agency:YESNO
ACADEMIC PROGRAM PREFERENCE: MSW BSW BOTH
Date Completed:
5 0

NORTHEASTERN STATE UNIVERSITY

SOCIAL WORK PROGRAM FIELD INSTRUCTOR AND TASK SUPERVISOR PROFILE

AGENCY			
EMAIL	РН(ONE CONTACT:	
JOB TITLE AND DESCR	IPTION:		
Years Employe	d at this agency:		
PROFESSIONAL EX	XPERIENCE:		
<u>PLACE</u>	<u>DATES</u>	POSITION	N
EDUCATION: SCHOOL	DEGREE	DATE	MAJOR
Licensure and/or Cre	edentials (if applicable):		
		Date Expires:	
1 ype:		Date Expires:	
Field Instructor/ Sup	-		
		Length of Time:	
Agency:		Length of Time:	
	h a current resume with th	is form and return to the field h campus, (918) 458-2346.	director.

Northeastern State University Social Work Field Practicum Memorandum of Understanding 2021-2022

Between

Northeastern State University Social Work Program

AND

Agency Name:
Address
City, State, Zip
Felephone:
Field Instructor:

General Policy

- 1. The primary concern of this agreement is the education of the social work student.
- 2. The duration of the Education Contract:
 - a. BSW and MSW foundation practicum will be a total of 450 hours.
 - b. MSW concentration and advanced standing practicums will be a total of 500 hours.

Students will be available during regular work hours of the agency, no more than four days per week (not to conflict with scheduled seminar times), or at other times by arrangement between the student and field instructor, with the approval of the Social Work Program Office of Field Education. BSW Student hours should coincide with times when the Agency Field Instructor is present.

- 3. Students will observe the University breaks and holiday schedule as a general rule. During the fall semester these are Labor Day and the Fall Break (Thanksgiving week); during the spring semester this is the Martin Luther King holiday and Spring Break (one week); and during the summer term Memorial Day and the Fourth of July are observed. In addition, agency holidays will be observed as appropriate.
- 4. No financial remuneration from either party to either party is involved in this agreement.
- 5. This agreement remains in effect until either party elects to withdraw from or renegotiate the agreement.

Responsibilities of the Social Work Program

- 1. The Social Work Program will be responsible for the academic administration of the field practicum experience, including identification, selection and assignment of students to field practicum sites.
- 2. The Social Work Program will provide information regarding its curriculum and program sufficient to enable the agency field practicum instructor to plan and conduct a field placement experience consistent with the expectation of the Social Work Program. Most of this information will be in the Field Practicum Manual provided to the student as well as the agency field instructor. Additional information will be provided by the Field Director as needed to facilitate the practicum experience of the student.
- 3. The Social Work Program will appoint a field practicum liaison from the NSU faculty. This liaison will work with the agency practicum instructor and the student throughout the practicum experience.

Responsibilities of the Agency and the Field Instructor

- 1. The agency, through the field instructor, agrees to provide the student with experiences commensurate with the field instruction objectives as defined by the Social Work Program.
- 2. The field instructor will attend the yearly orientation practicum.
- 3. The agency ensures the appointed field instructor will meet the academic and experience qualifications established by the social work program.
- 4. The agency agrees to provide the student with needed supplies and equipment, and an appropriate work space to complete the field experience.
- 5. The field practicum instructor agrees to work with the student and the field practicum liaison to design a meaningful field experience, clarifying for the student the general nature of the field work expected.
- 6. The field practicum instructor agrees to provide competent supervision, including orientation to the agency, and provide a **minimum of one (1) hour** of instructional conferences each week for the educational training of the student.
- 7. The agency field instructor agrees to confer with the field practicum liaison regarding individual students' educational needs and progress, and agrees to attend scheduled conferences (virtual) in the agency with the field liaison.

- 8. The agency field instructor agrees to complete an evaluation of the student's practicum work, using the form required by the school, midway through the practicum and again at the end of the practicum. It is agreed that the final evaluation will be completed by the last day of the practicum, or the last day of the semester, whichever occurs first. Any other schedule for completing the student's evaluation will be worked out in advance with the field liaison.
- 9. The agency field instructor and the agency at large agree to contact the field practicum coordinator in the event of any problems in the placement, especially those that may interfere with the continuance of the placement and pledges to work with the student and Field Director toward a mutually satisfactory solution before taking any action to terminate the placement.
- 10. The agency and field instructor will provide a learning experience that supports the social work perspective and the NASW Code of Ethics.

For the NSU Social Work Program:	Agency Field Instructor:
Date:	Date:
	Agency Administrator:
	Date:

NORTHEASTERN STATE UNIVERSITY SOCIAL WORK DEPARTMENT MEMORANDUM OF AGREEMENT FOR STUDENT

Student Confidentiality Statement

I have read the Confidentiality Section of the Field Practicum Manual and am familiar with the NASW Code of Ethics. I agree to uphold the ethical guidelines for social work practice as set forth in the NASW Code of Ethics and the NSU Practicum Student Contract. On behalf of the agency providing my field placement and professional practice, I will respect the privacy of clients and hold in confidence information obtained in the course of professional service.

Insurance and Health Coverage Statement

All agencies, colleges and universities of the State of Oklahoma are provided with liability coverage through the State of Oklahoma Risk Management Program which administers a self-insurance pool for all State entities under authority of 74 O.S. § 85.58 A. The State of Oklahoma enjoys sovereign immunity and waives its immunity only to the extent of the Governmental Tort Claims Act 51 O.S. § 151, et seq. or any other statute if such statute raises the limits of liability above those stated in the GTCA. The College does not provide professional liability insurance for Student(s). Student(s) must purchase and provide proof of professional liability insurance with limits of one million dollars (\$1,000,000) per occurrence and three million dollars (\$3,000,000) in the aggregate. Student(s) understand that if they do not provide proof of insurance and/or maintain professional liability insurance, they may not be allowed to remain in the clinical experience.

Also, the University does not provide health care coverage for students. Insurance coverage and payment for all health care services, including but not limited to emergency health care and/or first aid treatment, is the sole responsibility of the student.

I agree to these conditions.

Student Signature

Date

NSU PRACTICUM HOURS

STUDENT: _____

_____ PRACTICUM: _____ SEMESTER: _____

MSW (indicate program): _____ Circle one: BSW

PURPOSE: This form is to be used by practicum students to maintain a running total of hours in the practicum agency. The number of hours listed for each date should correspond with the number of hours listed on the Daily Practicum Logs. The Field Instructor should periodically review the hours and initial the form. The form should be available to the Faculty Liaison at seminar and during agency visits. The form is signed at the end of each semester and attached to the final evaluation. A new sheet will be used for Practicum II.

Date	# Hours in Practicum	Running Total	F.I. Int.	Date	# Hours in Practicum	Running Total	F.I. Int.

Field Instructor Signature

Student Signature

NSU WEEKLY FIELD INSTRUCTOR/STUDENT CONFERENCE (Check List)

STUDENT: _____ DATE: _____

Instructions: This form is to be used by field instructors to provide structure to the weekly supervisory conferences with students. Additional purposes of this form are to document the session with the student and to provide continuity between sessions. The field instructor completes the form and retains the original for future use. The student is given a copy for their use and appropriate follow-up.

1. Discussion of course work:

2. Reviewed student's practicum hours form: Excess time to be taken Time to be made up by student

3. Discussion or assigned clients and/or case files reviewed:

4. Competency discussed/completed: _____

{ } STUDENT PREPARED FOR CONFERENCE/USE OF SUPERVISION { } STUDENT ISSUES DISCUSSED { } OTHER: _____

5. Conference Notes:

Issues for next conference:

Field Instructor Signature

FIELD PRACTICUM ASSESSMENT

(Completed by Practicum II Student)

STUDENT:
AGENCY NAME:
FIELD INSTRUCTOR:
FACULTY FIELD LIAISON:
INSTRUCTIONS: This Field Practicum Assessment form is completed by the student at the end of Practicum II, after their Performance Evaluation has been completed and grade assigned. The form is given to the faculty liaison who will review and give to the field director. Students are encouraged to share their evaluation of the practicum with the field instructor, however, this is optional. If a student does not want their evaluation shared with the agency or field instructor (upon request) by the university please explain in the space provided.
Using the following scale, please rate each of the items below: 5= Excellent 4= Good 3= Fair 2= Poor 1= Unacceptable N/A= Not Applicable
<u>SETTING</u>
1. Exposure to professional social work practice:
2. Orientation to agency policy and procedures:
3. Opportunities to meet educational goals:
4. Agency commitment to social work education:
 5. Agency willingness to involve students in many aspects of agency functioning: 6. Provision of space needed for assigned tasks:
7. Suitability of physical environment to learning:
SUPERVISION
8. Availability of supervisor on scheduled basis:
9. Availability of supervisor "as needed":
10. Appropriateness of assigned tasks to student level:
11. Assignments appropriate to educational goals:

12. Supervisor involvement in setting educational goals:
13. Supervisor ability to evaluate strengths and weaknesses:
14. Supervisor willingness to mediate between student and agency as needed:
 15. Supervisor ability to encourage self-directed practice: 16. Supervisor assistance in teaching self-evaluation:
17. Supervisor commitment to social work education:
18. Supervisor knowledge and practice skills:
 19. Supervisor ability to assist in integrating theory and practice: 20. OVERALL EVALUATION OF PRACTICUM EXPERIENCE:

STRENGTHS OF THIS SETTING

WEAKNESS OF THIS SETTING

STUDENT SIGNATURE _____ DATE: _____

Do you wish to give permission for this assessment to be shared with the field instructor or agency if requested/needed?

____No, please explain:

STUDENT AND FIELD INSTRUCTOR EVALUATION OF SOCIAL WORK DEPARTMENT FIELD LIAISON

STUDENT:
FACULTY LIAISON:
AGENCY NAME:
AGENCY FI:
DATE:
Using the following scale, please rate each of the items below: 5= Excellent 4= Good 3= Fair 2= Poor 1= Unacceptable N/A= Not Applicable
Field Instructor completes the following:
1. The Faculty Field Liaison made regular visits to the agency (1 per semester/2 per BLOCK):
2. The Faculty Field Liaison was knowledgeable about the agency:
3. The Faculty Field Liaison was effective in working with the agency-based field instructor:
4. The Faculty Field Liaison was knowledgeable about current practice and issues relevant to this agency:
5. The Faculty Field Liaison was effective in assisting with goal setting, tasks, and problems:
6. Overall evaluation of Faculty Field Liaison in regard to work with the agency:
Student completes the following regarding Integrative Seminar:
7. Seminar sessions held regularly as scheduled:
8. The instructor clearly presented goals and processes of the seminar:
9. The seminar sessions were useful in relating course-work to the field setting: 10. The seminar sessions provided an opportunity to learn from the experiences of other students in their placements:
11. Overall evaluation of the Integrative Seminar: (RETURN TO FIELD DIRECTOR)