



Work-Site Placement Application (Rev. 3.2023)

I. Introduction

Use of a student's place of employment in social services as a field education site is an exception rather than a standard placement option. This option can only be completed one time, either for your BSW field placement, first year MSW field placement, or second year / Advanced Standing field placement and is subject to approval by the Field Program.

Work-site placements, however, have enabled many students to complete their education while remaining employed in agencies providing vital services to their communities, and our program honors and supports that service by permitting students to propose that their work-site be considered for a field placement when their work is substantively linked to all nine social work competencies.

This application serves to provide the Field Education Program with the information it will need to ensure that your worksite proposal meets both program standards and accreditation standards required by the Council on Social Work Education (CSWE), [including its 9 competencies](#).

The Field Program will, upon receiving your application, review it and provide written feedback in either approving or denying it to you and your employer.

We appreciate your taking the time to complete this diligently and completely prior to submission and invite you to share any questions you might have about your application with the Field Program at fieldoffice@sw.ua.edu.

Thank you,
Field Team

II. General Information:

Full name: _____

Work Phone: _____ Cell Phone _____

Crimson E-mail: _____

Proposed Work-Site is: Foundation (MSW 1st year) Concentration (MSW 2nd year or
Advanced standing)

BSW Placement or 1st Year MSW Placement _____

Have you requested a previous work-site with the field office? Yes No

How long have you been employed with the agency*? _____

**Students will need to have completed their probationary period (as defined by the employing agency) prior to the start of their field placement term.*

III. Agency Information:

Employing Agency: _____

Program, Department, or Unit (if applicable): _____

Address: _____

Phone Number: _____

Email Address: _____

Executive Director / Administrator: _____

Phone: _____

Email Address: _____

Direct Supervisor: _____

Phone: _____

Email Address: _____

Title of your Current Position: _____

How many years have you held your current position: _____

How many years have you worked with the agency: _____

Please list any other job titles / positions you have held within this agency:

Are you employed at Current Agency: Full-Time Part-Time _____ Hours per Week

IV. Employer Insurance Documentation:

Please Attach a copy of your agency's proof of Liability / Malpractice Insurance together with this application.

V. Duties and Social Work Competency Review:

a. Please describe your current job duties in detail, including any work regularly completed beyond the normal scope of your position:

b. Describe your proposed opportunities distinct from your current role in detail, clarifying when necessary, how you will divide your professional role from your proposed student role. Please show how you will meet each competency found on the learning contract in the [Field Handbook Addendum](#). If none exist, please note as much.

c. If you intend to complete a field placement in your current role, please describe how your current duties will meet each competency found on the learning contract corresponding with your field education course in the [Field Handbook Addendum](#):

Please note, again, that the [CSWE Guidance](#) allowing for this opportunity expires on 5/31/2022 and may not be renewed. Completion of this section does not guarantee that it will be allowable or approved, but its completion is required for it to be considered:

d. If given the choice between completing your work site placement in your current role (if eligible and still allowed by CSWE policy) and a new role, which would you prefer? Please indicate, briefly, why:

e. Please briefly describe the organizational supervisory structure of your agency or attach a copy of the agency's organizational chart. Please highlight the following positions in the chart: you, your direct supervisor, and your proposed field instructor (this person must be different from your direct supervisor):

Practicum Plan Reminder

One hour per week must be designated for field supervision with the assigned MSW field instructor. Work-Site students must be released from regular job responsibilities for this. Work-Site placements that require a student to work 40 hours a week and work **additional** hours for practicum are discouraged and may not be approved.

VI. Field Instruction and Supervision:

Proposed MSW Field Instructor: _____

Title: _____

(Must have an MSW from an accredited school with at least 2 years post-MSW work experience and cannot be your current supervisor)

Phone: _____

E-mail: _____

Is the proposed Field Instructor your current supervisor? Yes No

Has the proposed Field Instructor been your direct supervisor in the past? Yes No

Is the proposed Field Instructor regularly available on-site? Yes No

Please specify the proposed days and times you will assume the role of "student":

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	
							AM
							PM

Please specify the chosen day and hour you will be regularly supervised* by your Field Instructor:

M T W Th F Sa S Time: _____

****This time may change with the mutual approval of the student and Field Instructor.***

VII. Signatures:

Student Agreement:

I have reviewed and understand the requirements for Work-Site placements. I have discussed Work-Site Practicum criteria with my Director, Supervisor, and Proposed MSW Field Instructor.

Student Signature: _____ Date: _____

Administration Agreement:

The above student is applying for a Work-Site practicum placement. The student has been provided with information regarding the requirements of a work-site practicum, which you may wish to review. Your signature on this application indicates that you are aware of your employee's application for a Work-Site placement, that you are aware of the Work-Site requirements, and that you are willing to work with the Field Coordinator toward developing the appropriate field assignments and field supervision for the employee.

Executive Director / Administration: _____ Date: _____

Direct Supervisor: _____ Date: _____

Proposed MSW Field Instructor: _____ Date: _____

Field Program Approval: _____ Date: _____