	School of Social Work Field Education Program Chico, CA 95929-0550 Phone: (530)-898-5632 Fax (530)-898-5574 www.csuchico.edu/swrk	**BSW/MSW Field Application**

INSTRUCTIONS: TYPE OR PRINT LEGIBLY IN BLUE OR BLACK INK ONLY.
*All students are required to attach a resume to this application. Please note that agencies will expect students to bring a copy of their resume to placement interviews.
BSW students: This application must be completed prior to meeting with Andrea Rioux, BSW Field Coordinator. Please plan to bring it to your placement meeting with Andrea Rioux.
MSW Foundation Year Students: This application must be completed prior to meeting with Patty Hunter, Director of Field Education. Please plan to bring it to your placement meeting with Patty Hunter.
MSW Concentration Year Students: Please complete this application and return it to Patty Hunter, Director of Field Education, CSU, Chico School of Social Work, Butte Hall 511, Chico, CA 95929-0550.

If you have questions please contact (BSW students) Andrea Rioux alrioux@csuchico.edu or (MSW students) Patty Hunter phunter@csuchico.edu

STUDENT INFORMATION

Student Name	Date
Address	Phone
Message phone (please provide contact number where you can be reached **even when classes are not in session**)	Campus e-mail
Program standing: BSW _____ MSW Concentration _____ MSW Foundation _____	
Please check one: Traditional _____ Distributed Learning _____	
Do you have: Valid driver's license _____ Automobile insurance _____ Access to a vehicle daily _____	

Field instructors often ask me to tell them about the student who has requested an interview with their agency. The information you provide on this form will be used for this purpose. Consequently it is important that you reflect on the information being requested and provide thoughtful answers.

Please list previous human service employment/volunteer experiences relevant to social work practice

Agency	Title/role
Dates & extent of service	
Areas of involvement	

Agency	Title/role
Dates & extent of service	
Areas of involvement	

Please list previous field placements *(if applicable)*

For MSW Concentration year students: please list your MSW Foundation year placement.	Agency
	Field Instructor
	Population served
For BSW graduates: please list your BSW senior placement.	Agency
	Field Instructor
	Population served

Identify 3 skills and/or insights you have recently gained about yourself in relation to the field of social work.

1.
2.
3.

Identify 3 areas of professional development you would like to focus on in your field practicum.

1.
2.

3.

AREAS FOR CONSIDERATION IN SELECTING A FIELD PLACEMENT
In identifying the best learning opportunity and setting for your field placement, indicate here any preferences you may have. Remember, making a selection does not guarantee it will be available.

Field Instructor & Supervision Setting:

On-Site Field Instructor_____ Off-Site Field Instructor _____ Group Supervision _____

Agency Characteristics:

Public _____ Private _____ Small Community Agency _____ Large Organization (25+ employees) _____

Non-Profit _____

Geographic Preferences - Students may be required to commute to a field practicum site. Please list in order your preferred location. Use "1" for most preferred:

Butte County _____ Tehama County _____ Shasta County _____ Glenn County _____

Yuba/Sutter County _____ Colusa County _____ Other (please specify) _____

If you prefer to intern in Oroville check here _____

Placement schedule:

Set hours _____ Flexible _____ Available evenings/weekends _____

Factors for you in considering a field placement *(Rank in order your top five considerations)*

Learning opportunities available _____ Expertise of the Field Instructor _____

Hours/schedule available _____ Client population(s) served _____ Philosophy of agency _____

Nature of social work role in agency _____

Identify on the continuum your ideal working environment: *(X marks the spot!)*

Independent work……...Collaboration
Structured activity……..Flexibility
Predictability…….Always changing
Limited client contact……Daily client contact
Steady pace……Ever changing pace
One activity at a time……Multiple projects
Close supervision……..Self-directed activity

Social work learning experience interests – Please rank in order your top 3 learning interests (Use "1" for most interested)

Child welfare _____ Foster care _____ Community mental health _____ School based services _____

Medical _____ Aging services _____ Developmental disabilities _____ Substance abuse _____

Domestic violence _____ Homelessness/housing _____ Research & evaluation _____

Identify agencies or placement opportunities you are interested in learning about

Identify client populations that might create a value conflict for you

Potential conflict of interest: Please identify any agency that you have an existing or prior relationship with as an employee, volunteer, or client in the past 5 years.

Accommodations needed: *(such as adaptive technology, health concerns, language)*

COMPLETION OF THESE QUESTIONS AND YOUR SIGNATURE ARE REQUIRED FOR FIELD PLACEMENT

Note: Agencies may require the following documentation: Driver's license verification, auto insurance verification, and criminal background check (students may be required to pay the costs associated with securing this background check).

Do you anticipate being employed or volunteering during the next academic year?

No _____ Yes _____ *(If yes, where? Hours/times per week?)*

Criminal history: Have you ever been adjudicated or convicted of a violation of ANY local, state, federal, Canadian or international law (other than non-moving motor vehicle violations)?

No _____ Yes _____ *(If yes, please provide details)*

Substance abuse & addiction: Are you presently addicted to or excessively using alcohol, narcotics, barbiturates, or other habit forming drugs, or abusing prescription medications?

No _____ Yes _____ *(If yes, please provide details)*
Driver's license: Has your driver's license EVER been suspended or revoked at any time? No_____ Yes _____ *(If yes, please provide details)*
Professional license: Have you EVER has a professional license suspended or revoked? No _____ Yes _____ *(If yes, please provide details)*

CERTIFICATION AND RELEASE OF INFORMATION

I have read and do hereby certify that the information contained herein is correct and that I meet the eligibility criteria for admission to the BSW/MSW Field Education Program.

_____ _____
Student signature Date

Sign only ONE of the following releases of information statements:

YES, I DO grant permission to the CSU, Chico School of Social Work to release the information provided in this application to potential field placement agencies and organizations. I understand this permission will expire in 12 months from the date of my signature, unless I revoke it sooner. This release may be revoked at any time by written request to the Director of Field Education.

_____ _____
Student signature Date

NO, I DO NOT grant permission to the CSU, Chico School of Social Work to release the information provided in this application to potential field placement agencies and organizations.

_____ _____
Student signature Date

Oath of Honesty and Consent Form for Social Work Practicum

Please read the following statements carefully, and sign at the bottom of the page.

1. I hereby certify that the statements contained in this completed Practicum Application (including the face sheet, application sheet, etc.) and any other information as part of this application and attachments are true and correct. I agree and understand that any misrepresentation or omission of any material facts on my part may be cause for delay in placement, separation from the practicum, and/or initiate immediate review by the Director of Field Education and the Field Education Committee.
2. I hereby give permission to the Director of Field Education, the School of Social Work and its faculty members, and any of the approved practicum agencies or agency field instructors, to verify any and all information contained within this application. This may include contacting former employers, field agencies, and/or agency field instructors, reviewing all school records, etc.

   Please be advised that if information should come to our attention that may affect your professional student and/or practicum role and, thus, the practicum experience, we shall be authorized to assess and discuss the significant information with the appropriate parties.
3. I understand that any information contained in this application packet and/or any pertinent information relating to my professional student role shall be discussed between CSU, Chico faculty as well as approved practicum agencies and their representatives.
4. I understand that some social service agencies will request a security background investigation, a fingerprint check, a random drug screening, a physical examination, a TB test, immunization verification, a valid CA driver's license, etc. as requirements for their placement interview process and for practicum site confirmation. I am willing to participate in these additional checks and give permission for the results to be provided to the Social Work Program when requested. I also understand that if I fail these screens, I will not be confirmed at the specified agency, may become ineligible for a practicum, and may not be placed for an entire academic year.
5. I shall fulfill the responsibilities of the student practicum role, be in compliance with all practicum policies and procedures as outlined in the Field Education Handbook, and the University Catalog. This includes, but is not limited to:
   a. I will not contact agencies on my own to establish my practicum;
   b. I will follow all procedures when requesting special accommodations;
   c. If I fail a practicum placement interview (for reasons other than competition), I understand that I may be considered ineligible for the practicum, may be removed from the field education process, and may be the subject of other procedures that require further action for student eligibility.
6. At all times, I shall maintain professional conduct in accordance with the school's academic standards, i.e., the NASW Code of Ethics and professional social work values.
7. If a situation arises and I need to terminate the practicum before fulfilling my practicum commitment, I shall terminate in an appropriate, professional manner as designated by the University and the assigned agency, and I will provide notice as required by the University and the assigned agency. I understand that any such termination will be done only with the written approval of the University and the assigned agency.

I have reviewed and understand all of the above statements and have agreed to be in compliance with all of the above, the Field Education Handbook, and the Student Handbook. I certify that the information contained in this practicum application packet is true and correct to the best of my knowledge.

Student Name (please print):_____

_____ _____

Student Signature Date