



THE UNIVERSITY OF ALABAMA
SCHOOL OF SOCIAL WORK

THE CAPSTONE OF HIGHER EDUCATION

****Please submit this to receive your CEU documentation****

Field Instructor Information

Name: _____

Agency: _____

Job Title at Agency: _____

Educational Background:

College or University	Degree	Year Awarded
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_____	_____	_____
_____	_____	_____
_____	_____	_____

Social Work Employment (Please list last 3 jobs):

Agency	Years Worked	Job Title
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_____	_____	_____
_____	_____	_____
_____	_____	_____

Professional, Civic, and Social Affiliations:

Social Work Licensing:

Type of license _____

Number of years as a field instructor:

The University of Alabama _____

Other Schools of Social Work _____

Please list other schools: _____
