Agency Information

AGENCY NAME:

STREET ADDRESS:

CITY:

STATE: ZIP:

EMAIL ADDRESS:

PHONE NUMBER:

Web Address/URL:

MSW Field Instructor

Name :

Title:

E-mail:

PHONE:

General Placement Information

Does the agency include personal safety training in orientation?	Yes No	If yes, please specify.
Does the agency require immunizations or other medical tests?	Yes No	

Does the agency require drug testing?	Yes No	If yes, does the agency cover the cost?	Yes No

Does the agency require a background check?	Yes No	If yes, does the agency cover the cost?	Yes No

General description of the agency (agency structure, mission, role of social work in agency, size, funding, clients served, location etc.):

Types of Student Experience Available?

BSW

MSW 1st year

MSW 2nd year

Does this agency provide students with the opportunity to demonstrate social work competencies through in-person contact with client systems and constituencies?

Yes

No

Comments:

BSW and MSW 1st year opportunities:

Generalist practice orientation

Case management

Interagency Experience

Intake/Assessment

Client Advocacy

Resource Linkage/Brokering

Group work with Clients

MSW 2nd year Practice Opportunities

Individual counseling

Group Counseling

Family Work

Couples Work

Planning

Leadership

Needs Assessment

Supervision

Program Development

Consultation

Staff Development

Budgeting

Community Organization

Grant Writing

Research

Comments:

Administrative Support: Administrative Support for having students

Physical space for students

In-service training opportunities

Orientation

Does the Agency have a diverse staff?	Yes No
Does the Agency serve a diverse array of clients?	Yes No
Is the Agency sensitive to multicultural practice?	Yes No

Comments:

Recommendation by Evaluator: Acceptance of Agency for placement
Non acceptance of Agency for placement

Overall Comments/Concerns:

Evaluator Signature

Date