



Department of Social Work

MU MSW APPLICATION FOR FIELD PRACTICUM

(Form must be completed to apply for field or to apply for changes to field)

Name: _____ MUID Number: _____

Address: _____

Phone: _____ Email: _____

Please indicate if you have completed or are currently taking the following social work courses. If you have completed, please indicate your grade.

Completed	Currently Enrolled	Course	Grade
		SW 501 Foundations of Generalist Practice I	
		SW 511 Foundations of Human Behavior in the Social Environment	
		SW 541 Foundations of Research	
		SW 531 Foundations of Generalist Practice I	
		SW 521 Foundations of Policy	
		SW 551 Foundation Field Practicum - 9 credit hours total required	
		SW 615 Psychopathology	
		SW 631 Health Care: Models and Practice	
		SW 633 Advanced Clinical Social Work Practice in Behavioral Health Care with Individuals and Families	
		SW 634 Advanced Clinical Social Work Practice in Behavioral Health Care with Groups, Communities and Organizations	
		SW 653 Advanced Field Practicum– 9 credit hours total required	
		SW 655 –Comorbidity of Mental Health and Physical Disorders	
		SW 670 Advanced Theory and Practice with Children	
		SW 673 Family and Community Violence in Rural and Underserved Areas	

Overall GPA: _____

Please List Your Top Three Agency Choices Below

1. _____
2. _____
3. _____

You are expected to interview with at least two sites enabling you to make an informed choice with regards to deciding where you will be completing your field placement experience.

Please provide the contact information and a description of your interviews.

I. AGENCY INFORMATION

Agency Name:	
Agency Address:	City/State:
Field Instructor Name and Contact Information:	
Agency Director:	
Director Email:	Director Phone:
Website	

Provide details of what was discussed in the interview, what opportunities this site will afford you as a student, and your thoughts on the overall interview experience.

II. AGENCY INFORMATION

Agency Name:	
Agency Address:	City/State:
Field Instructor Name and Contact Information:	
Agency Director:	
Director Email:	Director Phone:
Website	

Provide details of what was discussed in the interview, what opportunities this site will afford you as a student, and your thoughts on the overall interview experience.

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III. AGENCY INFORMATION

Agency Name:	
Agency Address:	City/State:
Field Instructor Name and Contact Information:	
Agency Director:	
Director Email:	Director Phone:
Website	

Provide details of what was discussed in the interview, what opportunities this site will afford you as a student, and your thoughts on the overall interview experience.

If you are planning to do an agency-based placement please indicate so here along with a brief list of MSW level activities your agency will allow you to perform, and the name and contact information of your proposed MSW Field Instructor:

After you have completed your interviews and have been accepted by the agency as a field practicum student, you will need to acquire signatures.

All signatures must be attained for this application to be reviewed. No practicum hours can be logged until this application is approved by the Marshall University Department of Social Work Field Department.

Student Signature **Date**

Organization/Agency Director Signature **Date**

Proposed Field Instructor Signature **Date**

MSW Field Director Signature **Date**

Please complete and return to: Alysha Nichols, MSW Field Director at:
anichols108@marshall.edu