**MSW PROGRAM FIELD APPLICATION – 2ND YEAR**

**Please return this application along with a copy of your professional resume to the Director of Field Placement, David King,** **David.King2@indwes.edu****, upon completion.**

**This application and all required materials *must be submitted by the deadlines below.***

* ***Practicums beginning in January (by October 1st)***
* ***Practicum beginning* in May (by February 1st)**
* **Practicums beginning in August (by June 1st)**

**Late applications will not be accepted*.***

Name Click here to enter text. Date: Click here to enter text.

Address: Click here to enter text.

Telephone No. Click here to enter text. Cell Phone No. Click here to enter text.

E-mail Click here to enter text.

**Transportation & Insurance Information**

Students must be able to provide proof of driver’s license, car insurance, and must have a car available for use.

I have a car available for my use. \_\_\_ Yes \_\_\_ No

I have a driver’s license and car insurance. \_\_\_ Yes \_\_\_ No

I have medical insurance. \_\_\_ Yes \_\_\_ No

**Emergency Notification Information**

Name: Click here to enter text. Relationship: Click here to enter text.

Address: Click here to enter text.

Telephone Click here to enter text. Alternate Telephone Click here to enter text.

Email Address Click here to enter text.

**Language**

I have skills in a second language. \_\_\_ Yes \_\_\_ No

Second language and proficiency: Click here to enter text.

**Educational Information**

Current Social Work Program GPA \_\_\_\_\_\_ (a 3.0 overall GPA is required to register for field seminars and to participate in your practicum. A review of your grades will occur prior to your practicum start date).

2nd year applicants, attached a copy of your degree audit classes completed to date

I have attached a copy of my degree audit. \_\_\_ Yes \_\_\_ No

**Legal Issues**

Students may be asked to submit to a background check by their field placement agency prior convictions may restrict your ability to achieve placement. The student should inquire with the placement site and/or your state licensing laws regarding any questions or concerns)

Have you ever been convicted of a felony, misdemeanor, DUI or DWI? \_\_\_ Yes \_\_\_ No

 If yes, please explain. (Provide dates, nature of offense and resolution)

Click here to enter text.

Have you ever had a warrant issued for your arrest? \_\_\_ Yes \_\_\_ No

 If yes, please explain. (Provide dates, nature of offense and resolution)

Click here to enter text.

Have you ever received a disciplinary action or been fired from a place of employment? \_\_\_ Yes \_\_\_ No

 If yes, please explain. (Provide dates, circumstances and resolution)

Click here to enter text.

Student Visa Status - (if applicable check those that apply)

\_\_\_\_\_\_\_\_\_\_F-1 (Student Visa) \_\_\_\_\_\_\_\_\_\_ J-1 (Exchange Student Visa)

**Current Employment**

Name of Current Employer Click here to enter text.

Average Hours worked: Click here to enter text. per week

**Field Placement Site Selection**

Identify **3 agencies** in your area that you are pursuing for field placement. You do not have to have interviewed yet at the sites listed.

**First Agency Name:** Click here to enter text. **Contact Person**: Click here to enter text.

**Address:** Click here to enter text.

**Telephone** Click here to enter text. **Alternate Telephone** Click here to enter text.

**Email** **Address of contact person** Click here to enter text.

**Services Provided**: (aging, child welfare, medical, etc.) Click here to enter text.

**Describe any dual relationships you may currently have with this agency** (i.e. student was or is a client of the agency, relatives or friends of the student are clients or employees of the agency, there are outside friendships of the student and agency employees or clients, the student is related to someone by blood or clan at the agency, the agency served as an employment site in the past) Click here to enter text.

**Describe current status of efforts to contact or request field placement opportunities:**

Click here to enter text.

**Second Agency Name:** Click here to enter text. **Contact Person**: Click here to enter text.

**Address:** Click here to enter text.

**Telephone** Click here to enter text.  **Alternate Telephone** Click here to enter text.

**Email** **Address of contact person** Click here to enter text.

**Services Provided**: (aging, child welfare, medical, etc.) Click here to enter text.

**Describe any dual relationships you may currently have with this agency** (i.e. student was or is a client of the agency, relatives or friends of the student are clients or employees of the agency, there are outside friendships of the student and agency employees or clients, the student is related to someone by blood or clan at the agency, the agency served as an employment site in the past)

 Click here to enter text.

**Describe current status of efforts to contact or request field placement opportunities:**

Click here to enter text.

**Third Agency Name:** Click here to enter text. **Contact Person**: Click here to enter text.

**Address:** Click here to enter text.

**Telephone** Click here to enter text.  **Alternate Telephone** Click here to enter text.

**Email** **Address of contact person** Click here to enter text.

**Services Provided**: (aging, child welfare, medical, etc.) Click here to enter text.

**Describe any dual relationships you may currently have with this agency** (i.e. student was or is a client of the agency, relatives or friends of the student are clients or employees of the agency, there are outside friendships of the student and agency employees or clients, the student is related to someone by blood or clan at the agency, the agency served as an employment site in the past) Click here to enter text.

**Describe current status of efforts to contact or request field placement opportunities:**

Click here to enter text.

**Personal / Professional Information**

Please describe your *detailed* responses to the following questions.

* Please describe the *social work* and *personal* strengths you believe you can contribute to your 2nd year field placement.

Click here to enter text.

* Indicate the preferences you have about the client populations you wish to work with, or the type of agency based work you wish to gain experience with, and your reasons for these preferences.

Click here to enter text.

* Discuss and describe what you are looking for in a Field Supervisor and from field supervision, including your hopes and expectations. Please also discuss what your supervisor can expect of you.

Click here to enter text.

**Additional Documents Required**

* **Resume – Please attach a copy your updated professional resume.**
	+ Include all volunteer and paid positions held as well as experiences you have had in counseling, tutoring, committee responsibilities, camp counseling, college leadership positions, and club involvements.
	+ Update resume upon completion of Foundation Year Practicum if needed.
	+ Give name of organizations worked for, your position title, length of involvement, and brief description of responsibilities.

The Center for Life Calling and Leadership offers assistance in resume building and students are encouraged to contact them at mywildcatworks.com.

* **Previous Field Evaluation**
* BSW Final Field Evaluation (if in advanced standing program)

**STUDENT’S ATTESTATION AND CONFIDENTIALITY STATEMENT**

I have read the MSW manual for field instruction including sections regarding confidentiality, behaviors that can result in the termination of my practicum, the NASW Code of Ethics and withdrawing from or failing field seminars found therein. I agree to abide by the policies and procedures outlined in the manual for field instruction. I further agree to uphold the ethical guidelines for social work practice as set forth in the NASW Code of Ethics and on behalf of the agency providing my field placement and professional practice. I will respect the privacy of clients and hold in confidence information obtained in the course of professional service.

Student Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**STUDENT’S FERPA STATEMENT**

Family Education Rights and Privacy Act (FERPA): The Office of Field Director may share all relevant information with appropriate persons who may include the IWU faculty liaison, the agency field instructor, the agency administrator, the student’s academic advisor, or the director of the Masters of Social Work Online program. Relevant information is defined as information that may involve the field placement selection, clients, agency field instructors, staff, the student learning experience, or school policy. Such information will be shared to enable informed choice by field instructors, protect clients, protect students, and facilitate the learning process. Agency field instructors and faculty liaisons are also expected to share relevant information with the Field Director. By signing this statement, the student also provides release of information. This release includes academic record (directory and non-directory information), all contents of the field application, and evaluations from previous field education experiences. This release gives the Field Director permission to release the above information to agencies with whom the student may interview and/or be placed as well as faculty liaisons.

 Student Signature Date

Upon receipt of this completed application and all required completed documents, the Director of Field Experiences will contact you to set up a phone interview.

Please direct questions to David King,**David.King2@indwes.edu****.**

**By submitting this application for field placement, I agree that I have received and read the MSW Field Manual. I further attest that all information provided in this application is accurate.**

**Please scan and submit this completed application with signatures and all required attachments to** **David.King2@indwes.edu****.**