

MASTER OF SOCIAL WORK PROGRAM PROPOSAL TO UTILIZE EMPLOYER FOR FIELD PLACEMENT SITE

CHECK HERE IF YOU ARE A TITLE IV-E STUDENT

DATE

STUDENT'S NAME	1 st YEAF	RINTERN	2 nd YEAR INTERN
AGENCY NAME			
AGENCY ADDRESS	AGENCY REPRESENTATIVE NAME		
AGENCY PHONE #			
AGENCY WEBSITE	AGENO	Y REPRESEN	ITATIVE EMAIL
NAME OF UNIT/DEPT. WHERE STUDENT CURRENTLY WORKS			
STUDENT'S EMPLOYMENT STATUS		□FULL-TIME	□PART-TIME
NUMBER OF YEARS EMPLOYED AT AGENCY DESCRIPTION OF CURRENT EMPLOYMENT ASSIGNMENT/DU			
NAME OF OURDENT OURERWOOD	58.4.6.11	Di	IONE #
	EMAIL EMAIL		HONE #
NAME OF PROPOSED FIELD INSTRUCTOR	_1 V 1/ (1 _	Pī	HONE #
*A field instructor must have 2 yrs. post-MSW practice experien supervision. IS THE PROPOSED FIELD INSTRUCTOR \Box ON-S			of weekly
IF APPLICABLE NAME OF PROPOSED TASK SUPERVISOR	EMAIL	Pl	HONE #
*A Task Supervisor does not hold an MSW degree, but does have subject area); <u>OR</u> has an MSW but not the 2 years post-master's e your internship activities are arranged and monitored by someous serve as a Field Instructor or is an "off-site" Field Instructor.	experience.	You will need	a Task Supervisor if
DEGREE OF PROPOSED TASK SUPERVISOR————————————————————————————————————			
NAME OF PROPOSED FIELD PRACTICUM SITE/UNIT/DEPT.—			
DESCRIBE HOW THE PRACTICUM LEARNING ACTIVITIES WIL	L BE SIGN	IFICANTLY DI	FFERENT FROM
EMPLOYMENT RESPONSIBILITIES			

PROPOSED PRACTICUM SCHEDULE (16 HRS PER WEEK) EMPLOYMENT SCHEDULE

Once fully completed and signed by all appropriate parties, the student will upload the document to the *Employer Based Placement Proposal Upload* form via CalState S4. Note that the Employer Based Placement is not approved until the Field Director has reviewed, signed, and notified the student and agency of the approval through email.



Memorandum of Understanding

Regarding Students Using Their Place of Employment as a Placement Site

This form serves as an agreement between the California State University, Stanislaus **Master of Social Work Program** and

Agency name

regarding the placement of

Student Intern's name

The above named student is an employee at the above named Agency and will remain on employee status during their student practicum. The following conditions are approved by the Agency and the MSW Program to protect the educational integrity of the student's field placement.

- 1. The site will have a designated MSW level field instructor, who is not the direct administrative (agency) supervisor of the student's work responsibilities. The designated field instructor for this placement is
- 2. The learning experiences developed for the student will be selected from a unit of the agency separate and apart from the unit where he/she is an employee.
- 3. The learning experiences assigned to the student will address the educational needs and objectives of the student and will differ substantially from their employee responsibilities.
- 4. The Agency and student agree to the attached plan regarding the practicum times and assignments.
- 5. The Agency agrees to provide a practicum experience for 16 hours per week for the entire period of the field placement.

Signatures:

PRINT NAME OF AGENCY REPRESENTATIVE	DATE	SIGNATURE OF AGENCY REPRESENTATIVE (current supervisor or administrator)
PRINT NAME OF STUDENT INTERN	DATE	SIGNATURE OF STUDENT INTERN
PRINT NAME OF PROPOSED FIELD INSTRUCTOR	DATE	SIGNATURE OF PROPOSED FIELD INSTRUCTOR
PRINT NAME OF PROPOSED TASK SUPERVISOR (IF APPLICABLE)	DATE	SIGNATURE OF PROPOSED TASK SUPERVISOR (IF APPLICABLE)

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