### NORFOLK STATE UNIVERSITY THE ETHELYN R. STRONG SCHOOL OF SOCIAL WORK OFFICE OF FIELD EDUCATION BACCALAUREATE SOCIAL WORK PROGRAM

### APPLICATION PACKET FOR FIELD PRACTICUM Fall 2021

The completed application packet is due to the BSW Director of Field Education 11/15/2021 by 5:00pm (nsubswfielded@gmail.com). *Incomplete packets will not be accepted*. Please use the checklist below to make sure that you have completed, signed and submitted all required forms and documents.

# CHECK LIST FOR FORMS REQUIRED FOR APPLICATION PACKET

Form/Document	Completed and In Packet
Application (typed)	
Reference 1 (professional)	
Signed Academic Evaluation	
Resume	
Cover letter	

## NORFOLK STATE UNIVERSITY

## THE ETHELYN R. STRONG SCHOOL OF SOCIAL WORK OFFICE OF FIELD EDUCATION BACCALAUREATE SOCIAL WORK PROGRAM

### APPLICATION FOR FIELD PRACTICUM 2021-2022

Instructions:

Please complete this form (typed) and submit it, along with two completed reference forms, a signed academic evaluation, your resume and a cover letter to the BSW Director of Field Education. This form and other required documentation must be completed and received no later than the due date established by the BSW Director of Field Education. All forms and required documentation must be submitted as one (1) packet. A late application may result in delay of field instruction placement. This <u>entire</u> completed packet is due Monday, November 15<sup>th</sup>, 2021 by 5pm in the Ethelyn R Strong School of Social Work email (nsubswfielded@gmail.com)

Date of Application:	Application: Current Advisor:		
First Name	Middle Name	Las	t Name
Student Number	Gender	University email Address	
Address (During Academic Year)	City	State	Zip
Home Phone	Work Phone	Alternate Phone	
Permanent Address	City	State	Zip

(If different from address listed above)

#### Work, Volunteer and Field Placement Experience

List positions you have held, beginning with the most recent experiences and indicate if it is paid, volunteer or an internship

	Name, address, phone Number of Organization	Position & Description of Skills/Responsibilities	Dates	Status
1				○ Paid
				○ Volunteer
				○ Internship
2				○ Paid
				○ Volunteer
				○ Internship
3				○ Paid
				○ Volunteer
				○ Internship

List other pertinent skills and training:

Describe the types of environments that enhance your learning: (E.g. fast-paced setting, small program)

Describe the social work skills you would like to develop:

Briefly describe the strengths you will bring to the field practicum:

Briefly describe the obstacles or potential limitations to your learning you will bring to the practicum:

Describe how you handle constructive criticism and supervision:

Describe in general terms, the types of opportunities you are interested in experiencing in your field placement

Please rank the following list indicating the **client population** that would provide you with a <u>new</u> learning experience. ( $1 = highest \ 10 = lowest$ )

 Children	 Older Adults
 Youth	 Older Adults and Families
 Children and Families	 Organizations
 Adults	 Community
 Other	 Other

Are there any circumstances that will require special consideration in your Practicum placement?

Yes\_\_\_\_\_ No\_\_\_\_\_(If yes, explain)

Indicate any possible restrictions on the days and/or hours you will be available to do field work: Field internships are scheduled for daytime hours.

Do you have a driver's license? Yes \_\_\_\_ No \_\_\_\_

Do you have access to transportation for placement days? Yes\_\_\_\_ No \_\_\_\_\_

## You are responsible for providing your transportation to and from your internship

Have you completed all academic requirements for practicum placement?

Yes \_\_\_\_\_ No \_\_\_\_\_

If no, what are you missing?\_\_\_\_\_

Have you successfully passed the Writing Competency Examination? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you a Member of NASW? Yes \_\_\_\_ No \_\_\_\_

Do you have professional liability insurance? Yes \_\_\_\_\_ No \_\_\_\_\_

## **REHABILITATION ACTION**

(Completion of the following section is optional)

To comply with section 504 of the 1973 Rehabilitation Act. If you **choose** to complete this section, please indicate below whether you have a disability or challenge which requires special consideration. Specify the consideration you are requesting.

Disability or Challenge

Special Consideration Request:

# **OFFICE OF CIVIL RIGHTS (OCR) RACE ETHNIC IDENTIFICATION**

Native American or Alaska Native	Asian Pacific Islander
African or African American	White
Hispanic	Other

# **HEALTH**

(Rate Your General Health)

Excellent Good Fair Poor

\*\* A health screening may be required by some Field Practicum agencies. Students are required to comply with this request, if they wish to be placed at the agency.

# Please rate your own level of professional social work field readiness in the following areas:

Knowledge/Skills/Experience	Little or No Experience	Some Experience	Experience
Ability to develop rapport and engage with others			
Ability to work cooperatively with others in a professional setting			
Ability to evaluate one's own professional growth, development and behaviors			
Ability to present written and oral ideas and information clearly			
Exposure to diverse populations			
Ability to cope with stressful situations within a professional context			
Ability to use professional supervision, use constructive feedback and work within administrative structure			
Ability to advocate for yourself and to use your own initiative to enhance your learning experience			

Values:	Little or No Experience	Some Experience	Experience
Openness to learning			
Appreciation of diversity and awareness of your			
own biases			
Familiar with and acceptance of the NASW Code			
of Ethics			
Self-reflection and awareness of your own self			
especially in regards to knowing self-boundaries			

# **DISCIPLINARY ACTIONS**

Have you ever been subject to disciplinary action(s) by a university or employer?

Yes \_\_\_\_\_ No \_\_\_\_ (If yes, please provide a statement describing the circumstances below)

## **BACKGROUND CHECKS**

A background check, finger prints, DMV record and drug screening may be required by some Field Practicum agencies. Students are required to comply with this requirement. A fee for background checks and finger prints may be required. The University does not pay for these requirements.

### CONVICTION(S)

Have you ever been convicted of a crime other than minor traffic violation(s)?

Felony or Misdemeanor: Yes \_\_\_\_ No \_\_\_\_ (If yes, please attach a statement to this application describing the circumstances)

Note: Many of our field agencies now require a criminal background record check prior to accepting students for placement; as a result, it is imperative for students to inform the BSW Director of Field Education of any personal background information that may appear on a criminal background check that should be considered during the field placement process.

I hereby agree to abide by the NASW Code of Ethics and the policies governing NSU Field Placements as explained the NSU BSW Field Education Manual.

I certify that all information given on this form is complete and correct.

Signature

Date

#### NORFOLK STATE UNIVERSITY The Ethelyn R. Strong School of Social Work Baccalaureate Social Work Program

#### FIELD PRACTICUM APPLICATION REFERENCE

Applicant (Student) Name:	
Student Number:	
I, report.	, hereby do/do not waive my right to review this completed (cross out one)
Date	Student Signature

Dear Respondent:

The above named applicant (student) is applying for practicum in the Baccalaureate Social Work Program. As Respondent, you have been selected by the applicant as someone who will be helpful to us in evaluating his/her qualifications.

A major concern of the school is to arrive at a decision that will serve the applicant's best interest as well as that of the social work profession. Your response will therefore be an important aid in making a decision regarding this student's application for practicum and in planning an appropriate educational program. All information you provide is confidential.

Thank you for your assistance. Quincy Dinnerson, DSW, LMSW, QMHP-C, ACSW BSW Director of Field Education

Name of Respondent:

\_Phone No: \_\_\_\_\_

Please respond to the following items:

1.	How long have you known the applicant?	
2.	In what capacity have you known the applicant?	
3.	What do you consider to be the applicant's major strengths?	
4.	What do you consider to be the applicant's major weaknesses?	

Please give your impression of the applicant's rating on the following areas:

Rating Scale	Poor (1)	Average (2)	Goo d (3)	Outstandi ng (4)	Unable to judge (5)
Maturity and emotional stability					
Willingness to accept criticism					
<b>Responsiveness to instruction</b>					
Leadership ability					
Productivity in terms of quality of					
work produced					
Resourcefulness and creativity					
Sensitivity toward others					
Ability to respect differences in others (i.e.) race, class					
culture and ethnicity					
Ability to express ideas in written assignments					
Concern and commitment to studies					
Ability to express ideas					
Motivation and enthusiasm for knowledge					

## **Summary Evaluation:**

Please check one of the summary evaluations below

I am unable to recommend this applicant for practicum	
I recommend the applicant with reservation for practicum	
I recommend this applicant for practicum	
I enthusiastically recommend this applicant for practicum	

Additional Comments:

Signature of Respondent

Title

# Printed Name of Respondent

Date

Please return this completed form to the Student in a sealed envelope or email the letter directly to nsubswfielded@gmail.com

Name of Respondent:	Phone No:
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