

The University of Tennessee – College of Social Work
BSSW Field Placement Sites

Academic Year: ___ 2009-10 ___ 2010-11 ___ 2011-12 ___ 2012-13

1. Field Instructor Name and Credentials: _____

2. Agency Name: _____

3. Street Address: _____

City

State

Zip

Mailing Address: _____

City

State

Zip

Phone: _____

Fax: _____

Web Address: _____

Email: _____

4. Agency Description: _____

5. Is there one person within your organization who coordinates field placements?
___ Yes ___ No If yes, what is his/her name and contact information? _____

6. Which of the following best describes your setting and services?

_____ School

_____ Family Service Agency

_____ Hospital

_____ In-home Services

_____ In-patient Psychiatric

_____ Out-patient Mental Health

_____ Medical

_____ Legislative/Policy

_____ Other (*Please Specify*) _____

7. In general, what is the focus of the services provided? (*Check all that apply*)

_____ Aging

_____ Employee Assistance

_____ Hospice & Bereavement

_____ Community Organization

_____ Community Development

_____ Advocacy

_____ Social Policy

_____ Legislation

_____ Adult

_____ Families/Children

_____ Low Income

_____ Homelessness

_____ Mental Illness

_____ Substance Abuse

_____ Health

_____ Other (*Please Specify*) _____

8. What are the days and hours of operation of your agency?

Days: _____

Hours: _____

Are there opportunities for students to complete field hours in the evenings and/or on weekends? Yes No If yes, please specify: _____

9. Do social work students serve your agency at a single site or at multiple sites?
 Single Multiple If multiple sites, please describe below:

Name of Site	Location/Address	Services Provided

10. What types of social work activities should a student expect if placed at your agency? (Check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Individual Case Management | <input type="checkbox"/> Advocacy |
| <input type="checkbox"/> Family Case Management | <input type="checkbox"/> Grant Writing |
| <input type="checkbox"/> Group Opportunities | <input type="checkbox"/> Legislative Activity |
| <input type="checkbox"/> Discharge Planning | <input type="checkbox"/> Client Assessment |
| <input type="checkbox"/> Community Organization | <input type="checkbox"/> Program Management |
| <input type="checkbox"/> Community Outreach | <input type="checkbox"/> Other (Please Specify) _____ |
| <input type="checkbox"/> Client Education | _____ |

11. How many and what level students do you accept? (Remember that you are required to provide at least one hour of supervision per student per week.)

BSSW Juniors (Spring) BSSW Seniors (Fall and Spring)

12. Do you have a written job description for social work students? Yes No
 If yes, please attach.

13. Are students in your agency required to have use of a personal car? Yes No
 If yes, does your agency reimburse for mileage? Yes No

Are students required to transport clients in their personal cars? Yes No

Are students in your agency required to drive an agency vehicle? Yes No
 If yes, is a special drivers license endorsement needed? Yes No

14. Is a stipend available to the student? Yes No

15. Are there other pre-requisites required for placement? Yes No

If yes, check all that apply.

- | | |
|---|--|
| <input type="checkbox"/> Physical Exam | <input type="checkbox"/> Special Endorsement on Driver's License |
| <input type="checkbox"/> Fingerprints | <input type="checkbox"/> Other (Please specify) _____ |
| <input type="checkbox"/> Background Check | _____ |
| <input type="checkbox"/> TB Test | _____ |

16. Is there other information you would like to share with a student? (i.e., dress code, parking, etc.)
