

UNIVERSITY AT ALBANY
SCHOOL OF SOCIAL WELFARE

LETTER OF INTENT FOR 2nd YEAR PLACEMENT

INSTRUCTIONS: Please complete and return this letter of intent along with one (1) copy of an up-to-date resume to the Field Office by **March 26, 2008.**

NAME:

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LOCAL ADDRESS & PHONE NUMBER:

Phone: ()	E-mail
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SUMMER ADDRESS (IF DIFFERENT FROM ABOVE) AND PHONE NUMBER:

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* WHERE WAS (IS) YOUR FIRST GENERALIST PLACEMENT?

Field Instructor:

* WHICH CONCENTRATION HAVE YOU CHOSEN FOR FALL 2008 ?

<input type="checkbox"/> CLINICAL PRACTICE	<input type="checkbox"/> M.A.C.R.O.
<input type="checkbox"/> PART TIME	<input type="checkbox"/> FULL TIME

FIELD PRACTICUM LETTER OF INTENT

2nd YEAR PLACEMENT

PLEASE LIST THREE (3) AGENCIES OR PRACTICE SETTINGS (IN ORDER OF PREFERENCE) THAT YOU ARE INTERESTED IN AS YOUR 2ND YEAR PLACEMENT.

1. _____

2. _____

3. _____

I understand that any information deemed important to the placement will be shared with the Field Instructor. I understand that the Field Instructor will also have the opportunity to read my academic files which includes my transcript application to the program, references to the program and other academic information. I am aware that many agencies require criminal background checks, child abuse registry clearance and health screenings (including drug testing, TB and Hepatitis-B test, etc.) prior to students being accepted in placements. Declining an agency request for a criminal background check or health screening is likely to limit my placement options or lead to my not being placed. I understand that any conviction of sexual offenses against children will deem me ineligible for continuation in or completion of the field program. I have read the 2nd Year Required Field Reading and abide by the terms.

Student's Signature

Date