UNIVERSITY AT ALBANY
SCHOOL OF SOCIAL WELFARE
Field Education Program

2nd FIELD PRACTICUM MSW FIELD VERIFICATION FORM 2018

Date of pre-placement interview: ____________________________________________

AGENCY: ___________________________________________________________________

PROGRAM/UNIT (if applicable): ________________________________________________

PROGRAM ADDRESS (if different than agency’s main location): ____________________

FIELD INSTRUCTOR’S NAME: (Please Print) _________________________________

The MSW who will evaluate your skills and provide weekly supervision during your internship.

FIELD INSTRUCTOR’S E-MAIL: ________________________________________________

FIELD INSTRUCTOR’S PHONE: ________________________________________________

Field Instructor completed required Seminar in Field Instruction (SIFI): YES [   ] NO [   ]

Comment: __________________________________________________________________

FIELD INSTRUCTOR’S SIGNATURE: ____________________________________________

STUDENT’S NAME: (Please Print) ____________________________________________

STUDENT’S PHONE: ___________________ STUDENT’S EMAIL_____________________

☐ I am available to be in field for two full, 8-hour days per week. I understand that any alteration to this requirement must receive approval from the Field Office prior to the start of field.

☐ I have contacted all other agencies with which I have interviewed, to alert them that I have accepted an alternative field placement.

☐ I understand that I am expected to meet all pre-placement agency requirements prior to the start of field.

☐ I will report to field on the start date provided on the field calendar. If I have made arrangements to begin field later than the official start date, I will notify the Field Office prior to the start of field.

In order to obtain a permission number to register for Field Instruction III (RSSW 752), I understand that I must complete and submit this form to the Field Office.

STUDENT’S SIGNATURE: _______________________________________________________

Please return this form to the Field Office (RI 116, Fax: 518-442-5202, sswfieldoffice@albany.edu)**