

**SUNY BUFFALO STATE
SOCIAL WORK DEPARTMENT
FIELD EDUCATION APPLICATION FORM
SWK 493-SWK 494**

NAME _____

CURRENT ADDRESS: _____

HOME PHONE: _____ **CELL PHONE:** _____

BUFFALO STATE E-MAIL ADDRESS: _____

IF YOU'RE SUMMER ADDRESS IS DIFFERENT FROM ABOVE, PLEASE PROVIDE:

ADDRESS: _____
(Street) (City/State/Zip Code)

I. ELIGIBILITY CHECK

I have completed all the prerequisite courses (See Handbook for Social Work Students) and I am eligible to enroll in the field instruction (see your faculty advisor to insure your eligibility and/or review your degree navigator):

YES _____ NO _____

My overall GPA is presently _____ (needs to be 2.0 or higher)

My GPA in Social Work is _____ (needs to be 2.0 or higher)

II. CONSIDERATIONS FOR TRANSPORTATION

Check all that are accurate:

_____ I have a valid driver's license.

_____ I have access to a car and plan to drive to my field placement site.

_____ I would prefer to travel within the Buffalo area for my field placement.

_____ I would be willing, if necessary, to travel 15 miles or more to my field placement site.
(Ex: North Tonawanda or Niagara Falls)

_____ I do not have access to a car and plan to use public transportation to and from my field placement site.

III. INTERVIEWING A STUDENT WHO IS IN FIELD FOR 2013-2014 SCHOOL YEAR.

Interview a social work student who is enrolled in Field Instruction and ask him/her the questions that follow. This interview is intended to help you prepare in advance for the field experience.

1. Who is the senior that you interviewed? Where is their field placement?

2. What do you wish you had known before you began your field placement? How and where would you have gotten that information?

3. What suggestions do you have for me to prepare for the field placement interview(s) with the potential agency?

Please complete this sentence: **After talking with the senior in placement and in order to get ready for the field placement experience, I plan to do the following:**

IV. REFLECTION ON COMFORT LEVELS IN VARIOUS SOCIAL WORK SETTINGS

Following are numerous social work settings. Using the following scale, rate your comfort level and reflect on your rating:

1: VERY COMFORTABLE 2: SOMEWHAT COMFORTABLE 3: COMFORTABLE
4: SOMEWHAT UNCOMFORTABLE 5: VERY UNCOMFORTABLE

- 01. A child protection program _____
- 02. A foster care agency _____
- 03. A school social work program _____
- 04. A residential program for children/youth _____
- 05. A treatment program for children/youth _____
- 06. An agency serving children and families _____
- 07. A needle exchange program _____
- 08. A substance abuse/alcohol abuse program _____
- 09. A day hospital for individuals living with mental illness _____
- 10. A crisis hotline that provides a variety of social work support _____
- 11. An agency that provides outpatient mental health _____
- 12. A program that supports immigrants and refugees _____
- 13. A shelter for people that are homeless _____
- 14. A domestic violence shelter _____
- 15. A hospice program _____
- 16. A program that works with HIV/AIDS residents/patients _____
- 17. A hospital setting working with patients and their supports _____
- 18. A legislative office _____
- 19. A local coalition working on justice and peace issues _____
- 20. An advocacy program that supports _____
- 21. A nursing home setting for older adults _____
- 22. A day treatment program for older adults _____
- 23. Older adult protective services _____
- 24. An agency serving a population not discussed above _____
- 25. Other, please specify _____

V. PRACTICUM SITES OF INTEREST

1. After reviewing your ratings and upon reflection, list all the general possible placement settings you wish to explore with the Coordinator of Field Education. Is there a specific agency that you are interested in for field practicum? If so, what agency? Why?

VII. INFORMATION NEEDED AND/OR QUESTIONS FOR THE COORDINATOR OF FIELD EDUCATION

Soon you will be meeting with the Coordinator of Field Practicum to jointly select a field placement site. At this meeting, what questions do you want to ask? Do you have any personal concerns you wish to share? Do you have any special needs that should be discussed?

VIII. RESUME

I understand that two copies of my up-to-date resume must be turned in with this completed application in order for me to proceed with placement procedures.

YES _____ NO _____

IX. SECURITY CHECK

All agencies in New York State are required to have new employees and interns complete an online Criminal History Background Checks (CBC) and Statewide Central Registry (SCR) through the New York State Justice Center. (<http://www.justicecenter.ny.gov/>) If you are concerned about a security check, you are strongly advised to discuss your concern with the Coordinator of Field Education, who can advise you in dealing with this issue.

X. MEDICAL CHECK

Regarding health matters, some agencies may require a physical examination and specific immunizations. It is suggested that students update their tetanus, TB testing, and consider immunization for hepatitis.

XI. SPECIAL NEEDS

Do you have any special needs that may require a reasonable accommodation in order to participate in the field practicum?

YES _____ NO _____

If yes, please indicate the special needs.

If yes, are your special needs and/or disabilities officially documented with the Office of Disability Services?

YES _____ NO _____

XII. SIGNATURES

1. I have read the Field Education Social Work Manual 2013-2014 and if I have any questions, I will bring them up with the Coordinator of Field Education. (www.buffalostate.edu/socialwork.edu/field-education)

Signature _____

Date _____

2. I give permission to the Coordinator of Field Education to share information found in this application with field placement sites in order to facilitate an appropriate placement.

Signature _____

Date _____

3. I certify that I have read and fully completed this Field Education Application and the information contained herein is correct to the best of my knowledge. I understand that any false information can lead to a referral to the Professional Academics Performance Standards Committee for the Social Work Department to review the implications of professional social work practice.

Signature _____

Date _____

Note: Some of the questions asked in this application have been adapted from exercises found in The Practicum Companion for Social Work: Integrating the Class and Fieldwork (3rd ed.) by J.M. Birkenmaier and M.Berg-Weger (MA: Pearson Higher Education Inc. publishing as Allyn & Bacon 2011).

