

# Request To Use Work Site for Field Education

Agency \_\_\_\_\_

Address \_\_\_\_\_  
Street City Zip Code

Telephone \_\_\_\_\_ --- \_\_\_\_\_ -- \_\_\_\_\_  
Area Code

Agency director \_\_\_\_\_

Current supervisor \_\_\_\_\_

How many hours per week do you work? \_\_\_\_\_

Current job description (continue on back of this form, if necessary) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Proposed intern responsibilities \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Proposed field educator \_\_\_\_\_ SWK degree: Y or N  
Name (Circle one)

***I give the field education coordinator permission to discuss my proposal to do my internship at my work site. I understand that I must complete 210 hours of field instruction per semester and that the duties and responsibilities for which I am paid must differ from my internship experience, that the clients whom I serve as a Social Work intern are different from those with whom I work as a paid employee, and that my work supervisor is not my field educator.***

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Signature

