



BSW FIELD APPLICATION

Important Issues to keep in mind as you fill out this application:

Aging Studies Certificate: If you are working on your gerontology certificate you must pick an aging placement. Please check yes on line one of the application. *However, all students are free to discuss an interest in an aging field placement with the field faculty.*

Aging Studies/Minor Certificate: If you are working on your gerontology minor you must pick an aging placement. Please check yes on line two of the application. *However, all students are free to discuss an interest in an aging field placement with the field faculty.*

Children's Services Certificate: If you are working on your children's services certificate you must pick a children's service's placement. Please check yes on line three of the application. *However, all students are free to discuss an interest in a field placement with children with the field faculty.*

Health Care Social Work includes a variety of healthcare settings.

Home visits are an important part of social work. Most agencies expect that students will conduct home visits after receiving appropriate training. The School of Social Work is very committed to students having the opportunity to make home visits. Students cannot refuse home visit assignments unless you feel that there are unusual safety issues. Please discuss your concerns with your agency field instructor and the School of Social Work liaison if this is the case.

Working during the Internship: If you have to work during your internship please keep in mind that you will still be expected to be at your field agency during regular business hours. Students cannot complete field hour's solely working nights and weekends. Although each agency has different levels of flexibility in developing schedules for students, the School's expectation is that you are consistently available during some of the agency's regular business day.

Place of employment: If you are requesting your current place of employment be considered as a field placement site, please fill out the appropriate section on the BSW Field Application requesting this information. Keep in mind you **CANNOT** use your current position as your internship. Students may complete their internship at their place of employment if it is a new learning experience. Students must submit an Employment Based Internship Agreement form to the Field Education Office thirty (30) days prior to the start of the semester if requesting an employment based internship. Agreement forms submitted less than 30 days prior to the start of the semester will not be considered. The request for an employment based internship must be approved by the Coordinator of Field Education. Students will be notified in writing if the request is approved or denied. Approval is based on requirements established by the Council on Social Work Education (CSWE). Please note that submitting the Employment Based Internship Agreement to the Field Education Office does not mean that the request is approved.

For future planning, please note that students are allowed one employment based internship while a student in the School of Social Work. Students who complete an employment based internship while in the BSW Program and who are accepted into the MSW program will not be eligible to complete an employment based internship as an MSW student.

Contacting Agencies on Your Own: All field placements must be coordinated through the Field Education Office. *Students are NOT to contact agencies on their own to set up field placements. Any agency contacted directly by the student without coordinating the contact through the Field Education Office will be disqualified as a potential field site for the student.*

Liability Insurance: Each student enrolling in field courses is provided professional liability insurance through the University of Central Florida, College of Health and Public Affairs.

Worker's Compensation: Students may not be covered by the field placement agency's worker's compensation program. Please discuss this with your agency Field Instructor. Students are encouraged to have their own personal medical coverage.

Instructions for Completing the BSW Field Application

1. Please **type or print** clearly in ink when completing the application and make two copies. Submit the original application to the Field Education Office. Take one copy with you when you go for your agency interview and keep one copy for your records.
2. **No request** for a field placement will be processed until you have completed all field application forms.
3. Make sure you answer **all** questions on the application. If a question does not apply, note not applicable (N/A) in the space provided.
4. Contact the Field Education Office if you have questions about completing the Field Application. The faculty for the Field Education Office are:

Ms. Jacquie Withers, LCSW
Coordinator, Field Education
407-823-5230 or 407-823-5716
Jacqueline.withers@ucf.edu

Mrs. Shelley Hall, MSW
Assistant Coordinator, Field Education
407-823-3346
Shelley.hall@ucf.edu



BSW FIELD EDUCATION APPLICATION

Date Application is submitted: _____ Full-Time Student _____ Part-Time Student _____

Working on a Aging Studies Certificate: Yes [] No []

Working on a Aging Studies/Minor Certificate: Yes [] No []

Working on a Children’s Services Certificate: Yes [] No []

Will you be completing Field Education in the Spring [] Summer []

(If you are completing Field Education in the summer, you must register for **SOW 4941, SPRING AND SUMMER** semesters)

PERSONAL DATA

Name: _____ Date of Birth: _____

PID Number: _____ Knights email: _____

Address: _____

City, State, Zip: _____

Home Phone: _____ Cell Phone: _____

**NAME OF PERSON(S) TO BE CONTACTED IN CASE OF EMERGENCY:
(Preferably closest relative or friend)**

Name: _____ Relationship: _____

Address: _____

City, State, Zip: _____

Work or cell phone number: _____ Home phone number: _____

Email: _____

1. **STUDENTS ARE RESPONSIBLE FOR PROVIDING THEIR INDIVIDUAL TRAVEL TO AND FROM THE AGENCY OF PLACEMENT.**

Do you have a car to drive to your placement? Yes [] No []
Do you have a car to use in your placement? Yes [] No []
Do you have a driver's license? Yes [] No []

2. **MEDICAL DATA:**

a. **Describe your general state of health:** _____

b. **If you are a person with a disability, please identify any accommodations needed** to enable you to effectively perform course and field work? _____

3. **PREVIOUS SOCIAL WORK INTERNSHIP(S):** List name of agency and briefly describe the internship(s) you have completed as an undergraduate.

Agency: _____
Description of internship: _____

Agency: _____
Description of internship: _____

5. **PAID EMPLOYMENT HISTORY:** Beginning with your most recent employment, list each job in which you have worked. Describe your responsibilities in each job. Attach additional sheet, if necessary.

Position: _____ Dates: _____ Full-time: _____ Part-time: _____
Employer: _____
Duties: _____

Reason for leaving: _____

6. **VOLUNTEER EMPLOYMENT HISTORY:** List name of organizations and describe below any previous work or volunteer experiences you have had, beginning with the most recent. (If you prefer, you may attach a current resume instead)

Organization: _____

Description experiences: _____

Organization: _____

Description experience: _____

7. **GENERAL HISTORY:** Most social work agencies have students complete background checks, including formal background checks, law enforcement finger printing, driving records, and criminal record checks. In most instances, the expense for the background check is the responsibility of the student.. We urge students to seek this information prior to entering field placement if there is sensitive information that may prevent you from being accepted at an agency. *[Please contact the Field Education Coordinator immediately for a personal interview if you believe this may be a problem.]*

The UCF School of Social Work cannot guarantee a field education placement or subsequent degree completion for students who do not pass background checks. In addition please answer the following questions:

Have you ever been arrested or convicted of a misdemeanor or felony? Yes _____ No _____

Have you ever had adjudication withheld on a misdemeanor or a felony charge? Yes _____ No _____

If you answer yes to either of the questions above, you **must** schedule an appointment with Field Education Coordinator. Answering yes to the above questions does not preclude your obtaining a field placement.

8. FIELD PLACEMENT INTEREST

Please rank your areas of interest. This will assist the Field Education Office with selecting a field placement site for you.

Addictions/Substance Abuse		Aging	
Children/Families		Health Care	
Mental Health		Domestic Violence	
Corrections		Homelessness	
Juvenile Justice		Other	

What county would you prefer? Orange [] Osceola [] Brevard []
 Seminole [] Volusia [] Other: _____

9. DO YOU HAVE KNOWLEDGE OF ANY LANGUAGE OTHER THAN ENGLISH: Yes [] No []
 If *yes*, indicate the language and fluency:

Language	Reading	Writing	Speaking

10. Learning Objectives: Indicate your three (3) major learning objectives for field Education:

A. _____

B. _____

C. _____

12. **Request for Place of Employment as Field Internship:** If you are requesting your place of employment as a field placement agency, please provide the information requested below.

In order for your place of employment to be approved as your field internship: (1) your work assignments for the field education course must be new and different from the assignments of your usual job; (2) you must have a BSW/MSW Field Instructor different from the supervisor assigned for your regular employment and the agency Field Instructor must meet the required standards of the School of Social Work; and (3) you must complete and submit to the Director of Field Education a *Employment Based Internship Agreement* detailing how these requirements will be satisfied (form found online at http://www.cohpa.ucf.edu/social/field_education/).

Agency Name Where Currently Employed: _____

Agency Address: _____

City, State, Zip: _____

Phone Number (include area code): _____

Contact Person: _____

13.. **BRIEF AUTOBIOGRAPHY:** In order to help make your learning experience in the field as meaningful and productive as possible, we need to have some information about you.

Please attach a TYPED autobiography that includes at least your personal background, your family and your career goals.

PLEASE READ AND SIGN THE FOLLOWING:

COORDINATION AND APPROVAL OF FIELD PLACEMENTS:

I understand ALL field placements must be coordinated through and approved by the Field Office prior to starting an internship and accruing any hours toward the field education requirements. I understand that I must submit a signed **Placement Confirmation Form** to the Field Education **prior to starting my internship** and that hours will not be counted toward the field education requirements until this form is submitted. I further understand that the Field Office CANNOT guarantee that I complete my internship at any particular agency or site but will strive to assign me to one of the interest areas I have indicated. Additionally, I understand should I need to change my field placement, I will need to obtain written approval of the Field Office prior to starting an internship and accruing any field hours at a new placement. I understand that any agency contacted by me without coordinating the contact with the Field Education Office will be disqualified as a potential field placement site.

Signature of student

Date

AUTHORIZATION FOR RELEASE OF INFORMATION

I authorize the UCF School of Social Work to release information to my field placement agency if necessary for the purpose of educational planning.

Signature of student

Date

BSW FIELD ORIENTATION

I understand that BSW Field Orientation will be held prior to the start of the semester and that attendance is **MANDATORY**. I further understand that in the event I am unable to attend BSW Field Orientation due to an excused absence (hospitalization, death in the family, etc), I must contact the Coordinator of Field Education in advance and schedule a meeting with the Coordinator of Field Education **before** I start my field placement.

Signature of student

Date

CONSENT, ASSUMPTION OF RISK, AND RELEASE:

_____ hereby applies to participate in the **University of**
(Student's Name)
Central Florida, School of Social Work Field Internship Program. I am acquainted with the various risks of serious personal injury or death to myself and others and the significant risk of personal property damage or destruction, and hereby assume for the above-named individual all risks and consequences associated with or arising in connection with such participation.

I hereby agree to indemnify and hold harmless the State of Florida, the Board of Regents of the State of Florida, and the University of Central Florida (UCF), their employees and students and all organizations involved in the coordination, hosting, staffing and contribution of equipment and supplies, and their agents, servants and employees from and against any and all claims, damages, actions, liability and expenses in connection with loss of life, personal injury and/or damage to property arising out of my participation in the above-referenced activity.

I HAVE READ THIS CONSENT, ASSUMPTION OF RISK, AND RELEASE AND UNDERSTAND AND FULLY AGREE TO ITS CONTENTS.

Signature of student

Date

PRINT NAME

PID

Signature of parent (If student is a minor under 18 years of age)