Students currently employed in a social service agency/institution or human service organization may complete their field practicum in their current job only if specific conditions are met. Students may also obtain employment at their place of internship; in which case this form needs to be filled out as soon as employment is offered. Approval of plans by the Director of Field Placement is required before the start of the practicum. Specific restrictions include, but are not limited to:

1. Agency meets all requirements for service as a placement site (including, in the case of concentration year if that agency is suitable for the competencies specific to advanced practice).
	1. If a clinical affiliation agreement is not established prior to the start of the student’s semester in which they require a field placement internship, for legal reasons, the student may NOT count hours until the clinical affiliation is in place and fully executed, regardless of whether this request form has been signed/approved.
2. Students are allowed to use their place of employment as a field placement site but can only do so for one of their placement experiences while enrolled at the University of Memphis (BA and/or MSW).
3. Student field assignments and employment tasks **must be distinct**, and must have clear links to the social work competencies, including any competencies added by the program, and their related behaviors.
	1. If employment tasks are to be supplemented at the workplace in a separate department than where the student works in order to meet learning plan competencies, this must be clearly noted in the learning plan, as well as when completing this form.
	2. The hours credited toward field placement **must be distinct** from the student’s employment hours.
4. The field instructor and employment supervisor of a student may be the same person. In such cases, supervision time for field education learning must be separate from supervision time for employment.
	1. The field instructor at the employment site must meet the usual requirements of field instruction. This means someone who holds an MSW degree with at least 2 years of post-graduate experience in the field of social work (for BA students, field instructor may hold a BSW degree with at least 5 years of post-graduate experience in the field of social work).
5. Assignment to placement remains solely the province of the field director. Approval is NOT guaranteed.

**DO NOT SUBMIT THIS FORM WITHOUT FIRST TALKING TO YOUR RESPECTIVE FIELD DIRECTOR TO LET THEM KNOW YOUR INTENTIONS TO USE YOUR EMPLOYMENT AS YOUR FIELD PLACEMENT INTERNSHIP.**

Field Directors:

* Professor Danielle Seemann (undergradate/BA students) dswatson@memphis.edu
* Professor Cherry Malone (1st year MSW students) ccmalone@memphis.edu
* Professor Maggie Landry (2nd year/Advanced Standing MSW students) malandry@memphis.edu

**Request to Use Employment as Field Form**

**SECTION 1: CONTACT INFORMATION**

Student Full Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student Email Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

UofM Field Director (from page 1) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FIELD PLACEMENT/EMPLOYMENT INFORMATION**

Employment Agency \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Department/Program \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Agency’s full address (incl. city, state, zip) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employment Supervisor’s Full Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employment Supervisor’s email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is Student’s proposed Field Instructor the same person as Employment Supervisor? Yes / No

If no, please fill out information on Proposed Field Instructor below:

Proposed Field Instructor’s Full Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Proposed Field Instructor’s email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION 2: TASKS/RESPONSIBILITIES**

**Student’s Employment Tasks/Responsibilities (please clearly differentiate from responsibilities as an intern, and specify difference in client population, practice methods/interventions, etc.):**

**Student’s Internship Tasks/Responsibilities (please include client population and practice methods used in field placement learning experience. Your internship responsibilities and tasks MUST relate back to the CSWE competencies in order to be approved).**

**SECTION 3: COMPETENCIES**

**Please indicate how you intend to meet all of the CSWE competencies for field education using your employment.**

|  |  |
| --- | --- |
| **COMPETENCY** | **PROPOSED TASK(S) THAT CAN MEET THIS COMPETENCY** |
| 1. Demonstrate Ethical and Professional Behavior
 |  |
| 1. Advance Human Rights and Social, Racial, Economic, and Environmental Justice
 |  |
| 1. Engage in Anti-Racism, Diversity, Equity, and Inclusion (ADEI) in Practice
 |  |
| 1. Engage in Practice-Informed Research and Research-Informed Practice
 |  |
| 1. Engage in Policy Practice
 |  |
| 1. **Engage** with Individuals, Families, Groups, Organizations, and Communities
 |  |
| 1. **Assess** Individuals, Families, Groups, Organizations, and Communities
 |  |
| 1. **Intervene** with Individuals, Families, Groups, Organizations, and Communities
 |  |
| 1. **Evaluate** Practice with Individuals, Families, Groups, Organizations, and Communities
 |  |

**SECTION 4: SCHEDULING**

**Please indicate hours/days that the student will remain at the agency as an intern, and what days/times the student will be fulfilling their employment responsibilities. Note, the field placement must be the primary learning focus. NO OVERLAP CAN OCCUR.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **AS AN INTERN** | **Fall** | **Spring** | **Summer** *(available for BA students only)* | **AS AN EMPLOYEE** |
| **Monday** |  |  |  | **Monday** |  |
| **Tuesday** |  |  |  | **Tuesday** |  |
| **Wednesday** |  |  |  | **Wednesday** |  |
| **Thursday** |  |  |  | **Thursday** |  |
| **Friday** |  |  |  | **Friday** |  |
| **Saturday** |  |  |  | **Saturday** |  |
| **Sunday** |  |  |  | **Sunday** |  |

**SECTION 5: CONTINGENCY PLAN**

**Please indicate your contingency plan should you be released from your employment (either voluntarily or involuntarily) during the internship experience:**

**SECTION 6: OBTAINING EMPLOYMENT (only needed if student is not employed with field placement agency upon start of internship; plans to gain employment with the internship agency while enrolled in field placement)**

**If the student is trying to OBTAIN employment at the current field internship site, please fill the following out:**

**PROPOSED EMPLOYMENT INFORMATION**

Date student wishes to begin employment at the agency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Agency Department/Program of sought employment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job title of sought employment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Supervisor in Employee Role: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is the Job Supervisor different from the Field Instructor? Yes / No

If yes, provide name of proposed field instructor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Note: Proposed employment tasks/responsibilities must still be separate from the internship tasks/responsibilities.**

**SECTION 7: SIGNATURES**

**Please return this form with the original PHYSICAL (ink) signatures of the following individuals.
*Note, digital (typed) signatures or signature stamps are NOT ACCEPTABLE.***

By signing this form, you, the undersigned, agree to the policies herein of this request, and acknowledge that the proposed internship at employment agency is distinct/separate from the employment itself.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Current Employment Supervisor’s Signature Date Signed

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Student’s Proposed Field Instructor’s Signature Date Signed
(*if same as employment supervisor, must sign twice)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Student Signature Date Signed

**Student, please return this form scanned via email to your respective field director:**

|  |  |  |
| --- | --- | --- |
| 2nd year/Advanced Standing MSW:Prof. Maggie Landrymalandry@memphis.edu  | 1st year MSW: Prof. Cherry Maloneccmalone@memphis.edu  | BA/Undergraduate: Prof. Danielle Seemanndswatson@memphis.edu  |

**Students: Do not write below this line. For UofM Field Team Use Only**

Is new CAA required? YES / NO

Request Decision: APPROVED / DENIED

Comments/Notes:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Field Director Signature Date Signed

***Field Director – provide finalized copy to student and put original in student’s physical field file.***