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**Field Agency Profile**

**(Please Save to your computer, then type information into form fields and check boxes;**

**fields will expand to hold your text.)**

1. **Name of Agency/Program:**
2. **Phone number:**       **Fax:**
3. **Email:**

4. **Mailing address:** Street or P O Box:       City:       State:       Zip:

5. **Location (if different from mailing address):**

6. **Administrator:**

1. **Contact for placements (if not administrator):**

 **Phone number:**       **Email:**

1. **Briefly describe agency function/mission:**

9. **Fields of Practice (check all that apply):**

[ ]  Aging/gerontology [ ]  Health care/wellness

[ ]  Child welfare [ ]  Mental health

[ ]  Community organization/advocacy [ ]  Public welfare

[ ]  Corrections/courts/justice [ ]  School Social Work

[ ]  Disabilities [ ]  Substance misuse/addiction

[ ]  Employment/occupational [ ]

10. **Primary Interventions (check all that apply):**

[ ] Behavior modification [ ] Individual therapy

[ ] Casework/case management/I&R [ ] Marital/relationship therapy

[ ] Crisis intervention [ ] Play/activities therapy

[ ] Family therapy [ ] Policy/program development/legislative

[ ] Grief/bereavement therapy [ ] Solution-focused/task centered therapy

[ ] Group therapy/psycho-education [ ] Spiritual counseling

 [ ] Trauma recovery therapy [ ]

11. **Agency Policy:**

a. Working Hours:       Nights? [ ] **Yes** [ ]  **No**  Weekends? [ ] **Yes** [ ]  **No**

b. Is a car required? [ ] **Yes** [ ]   **No**

c. Does agency reimburse mileage? [ ] **Yes** [ ]  **No**

d. Does agency offer any stipends? [ ] **Yes** [ ]  **No**

12. Does your agency require that student(s) have a physical examination or other health related tests/documentation prior to placement? [ ] **Yes** [ ]  **No**

(If yes, please describe)

1. Does your agency require that student(s) pass a KBI screening? [ ] **Yes** [ ]  **No**

If yes, who pays for the screen?

14. The Council on Social Work Education accreditation policy requires social work education programs to operate within the policy of a policy that prevents discrimination on the basis of race, color, age, sex, religion, ethnic origin, disability, political or sexual orientation. Can your agency operate under this policy in regard to accepting students? [ ] **Yes** [ ]  **No**

15. **Agency accommodations (check all that apply):**

[ ] Accessibility for students with disabilities (describe):

[ ] Desk [ ]  Phone [ ] Computer [ ] Typewriter

[ ] Clerical support

[ ] Private office space [ ]  Shared office space with private interview space

16. **Student learning experiences available (check all that apply):**

[ ]  Assessment [ ]  Use of DSM-IV

[ ]  Direct intervention: individuals [ ]  Direct intervention: families

[ ]  Direct intervention: groups [ ]  Videotaping of interventions

[ ]  Interagency meetings/coordination [ ]  In-services/training

[ ]  Specialized writing (grants, etc.) [ ]  Public speaking

17. Will your agency support the field instructor by adjusting the workload to allow supervision time and time for meetings with faculty liaison and supervisory training? [ ] **Yes** [ ]  **No**

18. Does your agency provide a formal orientation for students? [ ]  **Yes** [ ]  **No**

19. The Washburn Program prefers that at least two students be placed at an agency and usually requires two consecutive semesters. Are there any special preferences that you have for a student placed in your agency?

1. A current MSW license and at least two years of licensed MSW practice experience is required for field instructors of MSW students. Can your agency meet this requirement? [ ]  **Yes** [ ]  **No**

21. A current BSW license and at least two years of licensed BSW practice experience is required for field instructors of BSW students (or a LMSW with one year licensed practice experience). Can your agency meet this requirement? [ ]  **Yes** [ ]  **No**

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**Signature of** **Agency Administrator** **Date**

**Please complete the Agency Profile form, then print, sign and date, and return to:**

Director of Field Practicum

Department of Social Work

Washburn University

1700 SW College Ave

Topeka, KS 66621

785-670-1616