

SALEM STATE COLLEGE
SCHOOL OF SOCIAL WORK

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GRADUATE PROGRAM
ANNUAL UPDATE: AGENCY QUESTIONNAIRE

Date: _____

(Please make corrections to address as needed.)

Agency Name: _____

Street Address: _____

City, State, ZIP: _____

Telephone: (_____) _____ FAX Number: (_____) _____

E-Mail Address: _____

Web Page URL: _____ Web Page Director: _____

Executive Director: _____

Parent Agency, if applicable: _____

Name of person to contact in your agency regarding student interns:

_____ Position: _____

Telephone Number: (_____) _____ E-Mail: _____

Name of person completing this Application if different from above name:

_____ Position: _____

Telephone Number: (_____) _____ E-Mail: _____

Please indicate which of the following categories best fits your program.

Foundation Year (MSW I) Student
Academic Year: September - April (16hrs./weekly) Number of Students: _____

Foundation Year (MSW I) Student
Summer Block: Mid-May - Late August (32hrs./weekly) Number of Students: _____

Advanced Standing Student
(Entering May '05 to May '06 Advanced Program)
Summer Block: Mid-May '05 - Late August '05 (16hrs.weekly)
Continuing Academic Year: September '05 - April '06 (20hrs./weekly) Number of Students: _____

Concentration Year (MSW II) Student
Academic Year: September - April (20hrs./weekly)

Number of Students: _____

*Please indicate if you require Concentration Year students to complete 24hrs./weekly

Concentration Year (MSW II) Student
Summer Block: Mid-May - Late August (40hrs./weekly)

Number of Students: _____

- Can your agency offer supervised evening internship hours to students?

Yes No

If yes, evening hours available: from _____ to _____

- Can your agency offer supervised weekend internship hours?

Yes No

If yes, hours available: Saturday: from _____ to _____
Sunday: from _____ to _____

- Does your agency's insurance cover intern liability?

Yes No

If no, student will carry liability insurance.

- Is there an office or desk space provided for students?

Yes No

- Is there clinical support provided to students?

Yes No

- Is there privacy for client interviews?

Yes No

- Does your agency provide mileage reimbursement when students provide outreach services?

Yes No

Agency Supervisory Information

PLEASE COMPLETE ALL CURRENT INFORMATION AND **RETURN BY JANUARY 31, 2005.**

MSW Supervisory Requirements:

All of our graduate students must receive individual weekly supervision from a Field Instructor who is eligible for LICSW licensing, i.e., MSW degree plus a minimum of two years full-time post Master's work experience, which was supervised by an LICSW.

Do you have a staff person who is qualified to serve as Field Instructor?

Yes _____ No _____

Please name potential Field Instructor(s):

Name	Degrees & Certifications	Institution	Year	Major

Please name and describe the programs which are interested in providing an internship.

Please describe the types of assignments in which an intern would be involved. Specify the direct client services, organization and/or community tasks.

Please identify other staff who may assist with supervision.

Name	Degrees & Certifications	Institution	Year	Major

What other supervised learning will be provided in addition to the individual supervision by a Field Instructor, i.e., student group supervision, consultation.

Are there any special requirements of students in this setting, such as a bilingual capacity, special work schedules, use of car?

Please return this application with any of your brochures or program information. This information will be kept in our resource files and will be available to Field Education staff as they try to match students with potential placements.

Mary P. Byrne, LICSW
Coordinator of Field Education
SALEM STATE COLLEGE, School of Social Work
352 Lafayette Street, Salem, MA 01970

Thank you for completing this Application. If you have any questions please call the Field Education Office at 978-542-6698.

The School of Social Work also has a BSW Program. Would you be interested in BSW students? Yes _____ No _____