**WEST CHESTER UNIVERSITY - DEPARTMENT OF SOCIAL WORK**

**FIELD INSTRUCTOR APPLICATION**

**Name:** First Name Middle Initial Last Name (Maiden Name (if applicable))

**Title/Position:** Title/Position

**Work Phone:** Work Phone **Other Phone:** Other Phone

**E-mail Address:** Email Address

Starting with the MOST RECENT, list degrees received:

|  |  |  |
| --- | --- | --- |
| **Degree** | **College/University** | **Year Graduated** |
| Click or tap here to enter text. | Click or tap here to enter text. | Date |
| Click or tap here to enter text. | Click or tap here to enter text. | Date |
| Click or tap here to enter text. | Click or tap here to enter text. | Date |

List Licenses and Certificates received:

|  |  |  |
| --- | --- | --- |
| **License/Certificate** | **Issue by** | **Year Issued** |
| Click or tap here to enter text. | Click or tap here to enter text. | Date |
| Click or tap here to enter text. | Click or tap here to enter text. | Date |
| Click or tap here to enter text. | Click or tap here to enter text. | Date |

**Name of Site Agency and Department:** Name of Site Agency - Name of Department

**Site Address:** Street Address, City, State Zip

**If you have your BSW or MSW degrees, please complete this section:**

1. Please indicate which level of social work education you have completed:  BSW  MSW

2. Do you have 2 or more years work experience in social work since the completion of the degree indicated above?  Yes  No

3. If no, how many years prior to the completion of the degree indicated above have you worked in social services? Enter number of years years.

**If you *do not* have a degree in social work, please complete this section:**

1. What is your highest level of education?

Baccalaureate  Graduate Certificate  Master’s  PhD or Doctorate  Other Other

2. In what field of study is the degree indicated above? Major or field of study

**Supervisory Experience (for all applicants, regardless of education):**

1. Have you previously attended SIFI (Seminars in Field Instruction) at West Chester University or another institution?  Yes  No

2. How many students have you supervised in the past?

# BSW\* Students # MSW\* Students # Other Students: Students’ area of studies

*\*The Council of Social Work Education requires that MSW students are supervised by Field Instructors who have a MSW degree. BSW students may be supervised by Field Instructors who have a BSW or MSW.*

**\*\*\*\*Due to CSWE policies, we need to have record of verification of your degree. \*\*\*\***

**Please attach a copy of your:**

Current resume

Thank you for your partnership with West Chester University in developing the next generation of social workers!

Your Full Name, Title

Name, Title

Signature: Type full name in lieu of signature Date: Date.

For Administrative Use Only:

Date of most recent update: Date SharePoint: Date Access: Date

Rev. 9/20/17