Graduate School of Social Work
University of Houston

Office of Field Education
(713)743-8088 FAX:743-8014

FACULTY LIAISON FIELD VISIT REPORT
PART A: STUDENT ASSESSMENT

STUDENT _____ FIELD INSTRUCTOR _____

AGENCY _____ DATE OF CONTACT _____

SEMESTER, YEAR: Fall _____
Spring _____
Summer _____

FIELD COURSE: _____

CURRICULUM: Foundation _____ Gerontology _____
Health Care _____ Child& Fam _____
Mental Hlth _____ Political SW _____

1. Anticipated or identified problem areas: _____

2. Plan and Goals: _____

3. Impression of Student's overall functioning in field: _____

4. Impression of Student's use of supervision and relationship with Field Instructor: _____

5. OTHER COMMENTS: _____

Liaison Signature _____ DATE: _____