University of Houston
Graduate College of Social Work
Office of Field Education

APPLICATION FOR FIELD PRACTICUM II: Advanced Standing

1. Name: _____

Mailing Address: _____
(Street) (Apt. #)

_____
(City) (State) (Zip Code)

Telephone Number: Home: _____ Work: _____

Cell: _____ Pager: _____

E-mail Address **(print carefully):** _____

2. Course applying for:
_____ Field Practicum II

3. Semester applying for:
_____ Fall _____ (Year)
_____ Spring
_____ Summer

4. Status: _____ Full-time _____ Flex Option

5. Semester and Year you first entered GCSW**:** _____

6. At this point what concentration do you anticipate selecting. Check one.

a. Clinical Practice _____
b. MACRO Practice _____

7. At this point, please indicate if you plan to enroll in a specialization program.

a. Gerontology _____
b. Political Social Work _____
c. Trabajo Social _____
d. Health Disparities _____
e. None of the above _____

8. Which of these apply to the student learning opportunities in your agency? *(please check <u>all</u> that apply)*

☐ GLBT Community
☐ HIV/AIDS
☐ Children
☐ Adolescents
☐ Women
☐ Aging
☐ Families
☐ Homeless/Housing
☐ Substance
☐ Corrections/Juvenile Justice
☐ Policy
☐ Administration
☐ Schools (K-12/College)
☐ Health Care
☐ Mental Health
☐ Communities
☐ Grant Writing
☐ Poverty
☐ Ethnic Diverse Population
☐ Developmental Disabilities
☐ Immigration
☐ Spanish-speaking populations
☐ Advocacy
☐ Pregnancy
☐ Child Welfare
☐ Adoption/Foster Care
☐ Domestic Violence
☐ Sexual/Physical Abuse
☐ Grief and Loss
☐ Other _____

9. List any special conditions or limitations to be considered in arranging your field placement: These may include transportation, child care, and ability issues.

_____
_____
_____
_____
_____

10. What geographical part of town do you live in? *(please check one that apply)*

☐ East Houston	☐ Northwest Houston	☐ Woodlands/Conroe
☐ Southeast Houston	☐ Medical Center	☐ Katy
☐ Northeast Houston	☐ Downtown	☐ Galveston
☐ Inside the Loop	☐ Clear Lake/Pasadena	☐ Austin
☐ West Houston	☐ Sugar Land/Richmond	☐ Beaumont
☐ Southwest Houston	☐ Kingwood/Humble	☐ Other, please specify _______________

11. Many of our affiliated agencies have begun to require criminal background checks and drug screenings of all potential employees and student interns. If you have any concern about these procedures, please see the Director or Associate Director of Field Education. **I have read this item ______ Yes ________ No**

COMPLETE ATTACHED "BRIEF BIOGRAPHICAL STATEMENT" FORM. YOUR APPLICATION WILL NOT BE PROCESSED IF THIS FORM IS NOT ATTACHED AND COMPLETE. **(DO NOT ATTACH A RESUME)**

Student Signature ____________________ Date ____________________

Director of Field Education Signature ____________________ Date ____________________

FOR FIELD OFFICE USE ONLY

* *

AGENCY FIELD INSTRUCTOR DATE REFERRED

University of Houston
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BRIEF BIOGRAPHICAL STATEMENT

PLEASE PRINT LEGIBLY. Complete this form as carefully as possible. ATTENTION: **A copy of this form will be mailed to potential field instructors with affiliated agencies.**

1. Name: _____

2. Do you speak a language other than English? _____ No ____ Yes Language_____
   If yes, rate your ability to speak and understand on a scale of 1 to 5, with 5 being fluent _____.

3. Educational background:

   a. Undergraduate
      College _____
      Major(s) _____
      Degree _____ Date Received _____

   b. Graduate
      College _____
      Major(s) _____
      Degree _____ Date Received _____

4. Work experience:

   a. Years of work experience since undergraduate degree: _____
   b. List places of employment and job responsibilities below. (List most recent job first.)

Place of Employment	Dates	Job Responsibilities

5. a. Volunteer work: Describe any volunteer experiences you may have had. (List most recent first.)

Agency	Dates	Job Responsibilities

5. b. Relevant life experience (extensive or foreign travel, parenting, non-degree oriented course work, etc.)

_____
_____
_____
_____

6. Previous Internship: List below any previous social work field placements you may have had, most recent first.

7. Do you plan to be employed during field? _____ No _____ Yes _____ Hours employed per week

8. What skills do you hope to develop in your field placement?

9. What do you see yourself doing immediately after graduation?

10. What do you see yourself doing 3 to 5 years after graduation?

11. What is your ultimate career goal?

12. Any other information about yourself or comments you would like to convey to a potential field instructor.

ADVANCED STANDING STUDENTS ONLY

A. Please describe your undergraduate field placements below. Be specific.
Do not leave any questions unanswered.

1. Agency: _____

   Program Name: _____

   Field Instructor: _____

   Dates of Placement: _____

   Number of Semesters: _____

   Number of Hours Per Semester: _____

   Total Number of Hours: _____

   Describe your duties:

   Did you have responsibility for your own clients? _____ Y _____ N
   If so, approximately how many? _____

2. Agency: _____

   Program Name: _____

   Field Instructor: _____

   Dates of Placement: _____

   Number of Semesters: _____

   Number of Hours Per Semesters: _____

   Total Number of Hours: _____

   Describe your duties:

   Did you have responsibility for your own clients? _____ Y _____ N
   If so, approximately how many? _____

CRITICAL FIELD EDUCATION POLICIES

1. I understand that I must attend the required Field Orientation prior to beginning the first field practicum course I take at the GCSW. I have received and read the information regarding the date and time of the next scheduled Field Orientation.

_____ _____
Student Signature Date

2. I understand that a student will be terminated from the program if he/she is unable to secure a field placement after three (3) interviews each of which results in a documented violation of student standards.

_____ _____
Student Signature Date

3. I understand that field practicum hours must be completed during normal business time, Monday through Friday, 8:00 a.m. – 5:00 p.m.

_____ _____
Student Signature Date

4. I understand that students are required to purchase professional liability insurance prior to enrolling in field practicum courses. I have completed an insurance eligibility form and authorization for the cost of the insurance to be included on my University fee bill.

_____ _____
Student Signature Date

5. I understand that if I am absent from field without notifying my field instructor more than one time, my field placement will be terminated and a grade of Unsatisfactory will be assigned.

_____ _____
Student Signature Date