



Student Name

Date

MSW Field Education Practicum Application Packet

(Bring this packet to your first meeting with your assigned MSW Field Liaison)



APPENDIX 1
MSW Field Placement Steps
Department of Social Work
MSW Program

1. Meet with field liaison, complete the application packet (Checklist in Appendix 2), and have the placement site approved by the field liaison prior to the end of the fall semester.
2. Proof of background check from Department of Public Safety forwarded to the field liaison before the first day of your placement.
3. Register for the correct field course (SOWK 615, SOWK 625, SOWK 665, or SOWK 675) during your registration 'window' on the University's MARS system.
4. Student must be in good standing with all prerequisites completed. Any In Progress (IP) or Incomplete (IC) grades *must* be resolved before the last day of the semester before practicum is scheduled to begin.
5. Remind the field instructor before you begin your placement of the start date and time. Remind the field instructor of the agreed upon schedule and provide that information to the field liaison.
6. If you are completing your practicum at your place of employment or will be using an off-site MSW field instructor, additional paperwork is required. Discuss with the field liaison.

The importance of meeting these steps cannot be overstressed. ***Practicum will not begin unless all placement and documentation requirements are met.***



APPENDIX 2
Application Packet Checklist
Department of Social Work
MSW Program

All materials should be submitted and should be word processed. Use the boxes to the right of each number listed below to assist you in the process to complete this packet.

The application packet should be complete at the first individual meeting with the field liaison and must include:

- 1. Professional Commitment (Appendix 3)**
Students should read and then sign and date this form. *This will not be sent to your field instructor.*
- 2. Criminal Background Check Process and Form (Appendix 4/Appendix 4, Part II)**
Students should follow the directions on the bottom of page 44 for the Letter of Good Standing and Consent form, and then read and sign the agreement on page 45.
This will not be sent to your field instructor.
- 3. Intent to Register Form (Appendix 5)**
This should be typed or word-processed. Please keep in mind this form should be prepared thoughtfully as it will be reviewed potential field instructor. The field liaison will provide feedback regarding this form. *This will be sent to your field instructor.*
- 4. Resume or Curricula Vita**
Students are encouraged to take advantage of the Career Development and Center (located on the second floor in the Wigley Administration Building) for review of their resume prior to submission with this packet. The field liaison will also provide feedback on the resume.
This will be sent to your field instructor.
- 5. Agency Exploration Forms (Appendix 6)**
Students should submit *at least three different forms* to the field liaison. Students are encouraged to put thought and effort into these forms as the field liaison will use these forms to search out potential MSW field practicums for the student. *This will not be sent to your field instructor.*
- 6. NASW Student Membership (page 26-27)**
Refer to pages 26-27 in MSW Field Educational Manual Part 1 for more information.
Students should show documentation of purchased NASW Student Membership.
- 7. Student Liability Insurance (page 26-27)**
Refer to pages 26-27 in MSW Field Educational Manual Part 1 for more information.
Students should show documentation of purchased Student Liability Insurance.

Note: If the application is not complete at the first meeting, the student may be asked to re-schedule.



APPENDIX 3
Professional Commitment Form
Department of Social Work
MSW Program

When students enter practicum they are expected to accept and abide by social work obligations required by the profession, the law, and/or licensing regulations as they apply to aspiring social workers. Students assume responsibility for the liability risks that are inherent in their role as a practicing social worker. Each student must sign this section of the application in order to enter practicum.

1. I understand that criminal convictions may limit future employment and licensure. Federal and state law governs this. The Department has implemented a policy to require a criminal background check prior to placement that may include a review of juvenile offenses. (If, during the past five years a conviction occurred for a misdemeanor or felony for which a jail sentence could have been or was imposed, please describe these events, in writing and attach to this document.) Agencies may also require a more extensive background check. I understand I may need to be redirected to appropriate areas of practice if a conviction creates conflicts with practicum agency requirements.

2. I understand that lapses in professional conduct can impact practicum placement, future licensing and employment opportunities as governed by licensing regulations and the profession. These are best summarized in Section I, B-3 of the NASW Code of Ethics and the Minnesota Board of Social Work Standards of Practice, which I have reviewed.

3. I understand that the student social worker should not allow their own personal problems, psychosocial distress, substance abuse, or mental health difficulties to interfere with professional judgment, performance, or jeopardize the best interests of those for whom the social worker has a professional responsibility. I understand that if my personal issues jeopardize my performance and or impact clients, my placement may be terminated.

4. I understand that if I have had substance abuse difficulties, an agency may require a signed agreement to refrain from use of alcohol and or other mind-altering drugs during the period of the practicum. Some agencies may also require urine tests. I understand that if my personal difficulties jeopardize by performance and or impact clients, my placement may be terminated.

I have read the above and understand that any misrepresentation of known, current life stressors that might affect my performance in the practicum, or any related legal problems in my background, could result in academic and/or other sanctions. I am at this time able to practice social work, as a student, within the legal and ethical requirements of the profession and the law.

Signature _____ Date _____



APPENDIX 4
Letter of Good Standing and Consent Form
Department of Social Work
MSW Program

Date: _____

The following named individual is a student in good standing and has made application with Minnesota State University, Mankato, Department of Social Work for a practicum that requires a Minnesota Bureau of Criminal Apprehension Criminal Background Check.

Last Name of Applicant (please print): _____

First Name (please print): _____

Middle (full) (please print): _____

Maiden, Alias or Former (please print): _____

Date of Birth: _____ Sex (M or F): _____
(Month/Day/Year)

Social Security Number (Optional): _____

I authorize the Minnesota Bureau of Criminal Apprehension to disclose all criminal history record information to Minnesota State University, Mankato Social Work Department, 358 Trafton Science Center N, Mankato, Minnesota 56001 for the purpose of SOWK 615/625 or SOWK 665/675. The expiration of this authorization shall be for a period no longer than one year from the date of my signature.

I, _____ (print name) am signing this in the presents of a Notary.

Signature of Student

Date

Signature of Notary

Date

Criminal Background Check Process:

- 1. Sign this form in presence of a Notary. (Available Notary at MSU, Mankato's Campus Hub in CSU).
2. Stamp and address a return envelope to: MSW Field Education Director
Minnesota State University, Mankato
Department of Social Work, TN 358
Mankato, MN 56001
3. Send this form, a \$15 check written to 'MN BCA', and all information to: Minnesota BCA Record
1430 Maryland Ave E.
St. Paul, MN 55106



APPENDIX 4, PART II
Background Check Policy
Department of Social Work
MSW Program

The Social Work Department requires all students entering field courses to complete a criminal background check by the Minnesota Bureau of Criminal Apprehension (BCA). A completed background check must be in the student's file before they begin a field practicum in the spring semester. SOWK 615/625 Foundation Practicum & Seminar I&II and SOWK 665/675 Advanced Practicum and Seminar I&II students will comply with this policy. *A more intensive background check required by a placement agency may substitute for this requirement provided it occurs prior to the beginning of placement.*

Because social workers work with vulnerable populations, security background checks are required for field placement and for some employment situations. The implications of having a criminal record of felonies, gross misdemeanors, misdemeanors and/or arrests are important to consider. Substantiated complaints of maltreatment against children and vulnerable adults could preclude field placement in settings related to those populations. Previous termination from volunteer, internship, or paid positions because of harassment allegations could also limit placement. In some instances juvenile offenses have impacted field placement. It is to your benefit to be frank about this type of history with your faculty advisor and field instructor as needed.

To complete the background check students will do the following:

1. **Complete** the Letter of Good Standing and Informed Consent Form (Appendix 4). The Form must be signed in front of a notary (available on campus at the HUB).
2. **Mail the following documents to:**

Minnesota Department of Public Safety*
Bureau of Criminal Apprehension, CJIS Section
1430 Maryland Ave. E.
St. Paul, MN 55106

- Letter of Good Standing and Informed Consent Form (Appendix 4)
- **Include** the Minnesota Bureau of Criminal Apprehension fee - \$15.00 (personal check, money order, cashier's, or certified check with *MSUM, Dept. of Social Work* written on the memo line)
- **Stamped envelope** addressed to MSU, M Dept. of Social Work, TN 358, Mankato, MN 56001 – ATTENTION: MSW/BCA Report Enclosed (for protection of your confidentiality)

*You may call the BCA at 651/793-2400 or visit during normal state business hours if you need additional information. The website is <<http://www.bca.state.mn.us>>.

If you do not include all the necessary documents, BCA will return the incomplete application to the Department. It will then be returned to you for re-submission to the Department of Safety.

This delay can prevent students from beginning their placement as planned.

Information Contained in a Criminal Background Check

A criminal background check contains both public and private information. The State of MN defines public information as offense, date of the offense, court of conviction, date of the conviction, sentence, level of conviction, and probation agency or place of confinement. The public information does not include an individual's arrest history.

The State of MN defines private information as “Private data includes all arrest information, all juvenile records, all court information and convictions more than 15 years old.” *Juvenile criminal history information is considered private, and can only be released as described in Minnesota State Statute 299C.095 (Juvenile records may be released related to working with vulnerable populations).*

(Resource: Minnesota Department of Public Safety. (2005) Accessing criminal history records for non-criminal justice purposes. Retrieved from <http://www.dps.state.mn.us/bca/bca.html> on 8/25/05 State of Minnesota, St. Paul, MN)

Compliance

Failure to comply with this policy in the required timelines will result in delay and/or denial of permission to enter into SOWK 615/625 and or SOWK 665/675 at the discretion of field liaison.

Implications

Legal problems may limit field education and employment opportunities. Criminal convictions are reviewed when application is made for social work licensure in Minnesota and a conviction of a felony, gross misdemeanor and some lesser misdemeanors may keep the student/graduate from being licensed and/or employed.

Departmental Review

All records are kept confidential and secured in a locked office in the sole possession of the Social Work Department. If the criminal background check is returned with felonies, gross misdemeanors and/or misdemeanors, the Department may request further court documentation, to meet with the student, and/or for the student to submit a written explanation and any other information considered necessary by the program. When a criminal background check reveals the conviction of a felony, gross misdemeanor, or misdemeanor, the Department will inform your placement agency in writing regarding the offenses and the outcome. The student will be given the opportunity to take the initiative to discuss these issues with the agency in advance of that information being shared. The agency has final decision-making power as to the whether they will accept the student for placement. The Department holds the right to accept, suspend, or reject a student's application to SOWK 615/625 and or SOWK 665/675 based on academic standing, behavioral readiness for field practicum, and or criminal records. Actions taken by the Department may impact the student's continued progress in the social work program and are subject to appeal.

I have read and understand this policy of the MSU, M Department of Social Work.

Date: _____

Student signature

(Copy and submit ONLY this signature page with your Application to SOWK 615/625 and or 665/675 to indicate you have read this information.)



APPENDIX 5 (2 pages)
Intent to Register
Department of Social Work
MSW Program

Complete this form (accessible from the Department website) and submit in hard-copy. This form will be made available to potential practicum supervisors and or practicum sites when you interview.

While every effort will be made to meet the individual student placement preferences, agency availability, Council on Social Work Education requirements for MSW supervision, and other administrative issues will influence the final placement decision. Practicum in the MSW program is offered only as a concurrent placement, meaning that you will be in classes during both the spring and summer semesters that you are completing your practicum hours. Please see the MSW Student Handbook and or MSW Field Education Manual for more information.

Practicum semesters scheduling for: Spring, _____

STUDENT INFORMATION

Student's name: _____

Local Address: _____

Permanent address (if different): _____

Telephone number: _____

Cell phone number: _____

E-mail address: _____

MSU, M, Tech ID: _____

Faculty Advisor: _____

If Advanced Standing, undergraduate social work field practicum site: _____

Are you considering your place of employment for ONE of your practicum placements?

Foundation year – Yes___ No___ NA___

Concentration year or Advanced Standing – Yes___ No___

Student understands a MN background check is required prior to placement. Yes___ No___

Information related to violations of the law (misdemeanor, gross misdemeanor or felony) will be shared with potential field sites.

Student is expecting a B or better in courses they are currently enrolled in. Yes___ No___

I understand I will be expected to provide your own transportation to, from, and during your practicum placement. Yes___ No___

(continue to next page)

STUDENT PLACEMENT INFORMATION

Include a current resume or curricula vita with this form.

Directions: Please provide the question *and* the answer when you submit this document.

1. Are you anticipating anything that may interrupt your practicum experience over the next semesters? Yes or No (please explain if yes)
2. Please describe your areas of strength, as a narrative or using bullets, in under 150 words.
3. Please describe your areas of limitation or areas that need further development, as a narrative or using bullets, in under 150 words.
4. Please describe your learning goals (may include knowledge, skills, populations, or intervention goals) for the practicum experience using a narrative or bullets (under 150 words please). Foundation year students are *required* to do a placement that emphasizes the application of the generalist perspective. Concentration year students are *required* to do a placement that emphasizes the application of the advanced generalist perspective as defined by the program Mission, Goals, and Objectives. Students may want to talk with their academic advisor about each practicum prior to completing this section.
5. Please attach completed Agency Exploration Forms for agencies that you have explored and believe will be able to provide opportunities to meet your learning goals. Be prepared to discuss why they are a good fit.
6. **OPTIONAL:** Do you have any special issues, limitations, and or recommendations that need to be considered in the practicum setting? Yes or No (please explain if yes)

I certify that my answers are true and complete to the best of my knowledge. If this application leads to practicum, I understand that false or misleading information in my application, subsequent documents, or interview may result in my release from practicum and may result in additional disciplinary measures from the Department of Social Work and or Minnesota State University, Mankato.

Name _____ Date _____



APPENDIX 6
Agency Exploration Form
Department of Social Work
MSW Program

Use this form as a guide for exploring a practicum agency. The criteria listed below will help you to identify agencies that may be the right fit for your specific learning needs and Departmental requirements for practicum sites. Students are urged to explore multiple agencies and complete all the items possible on the form. You may access information through conversation, a website, or through collateral contacts. Please do not 'interview' or 'negotiate' with the agency representative regarding a placement without first contacting the field liaison.

Student: _____

Agency name: _____

Division or Unit of interest: _____

Agency director or contact person: _____

Agency director or contact person's email address: _____

Agency address: _____

Agency telephone: _____

Agency website: _____

Is student an employee of this agency? Yes ___ How long in months: ___ No ___

How does student know of this agency? _____

Field Liaison use only	
Field Liaison:	Date:
Contacted:	
Potential MSW prepared field instructor:	
MS prepared task supervisor:	
Approved / Not Approved (comments on reverse side)	



APPENDIX 7 (2 pages)
Student Training Experience & Internship Agreement
Department of Social Work
MSW Program

Name of College/University: _____

Name of College/University Program ("the Program"): _____

Type of Training Experience/Internship: _____

Dates of Training/Internship: _____

Student's Name: _____ Phone #: _____

Average number of hours to be worked by the Student each week: _____

Facility Name and Address:

Location Where Training will Occur (if different from Facility's Address above):

Facility Representative's Name: _____ Phone #: _____

Activities/Job tasks and skills the Student will learn:

Tools and Equipment the Student will use:

STUDENT RESPONSIBILITIES

In exchange for the opportunity to participate in the training experience/ internship at the Facility, the Student agrees to:

1. Keep regular attendance and be on time, both at school and at the Facility's training site. The Student will promptly notify the Facility's training site if unable to report. The Student's placement will automatically terminate if the Student terminates his/her enrollment in the Program or is no longer enrolled as a student at the College/University.

2. Demonstrate honesty, punctuality, courtesy, a cooperative attitude, desirable health and grooming habits, desirable/required dress and a willingness to learn; and
3. Furnish the coordinating College/University instructor with all necessary information and complete all necessary reports requested by the instructor. Submitting falsified reports is cause for immediate expulsion from the Program; and
4. Conform to all rules, regulations, and policies including health, safety, and work environment of the Facility, follow all instructions given by the Facility and always conduct myself in a safe manner; and
5. Consult with the College/University instructor/lab assistant about any difficulties arising at the Facility's training site; and
6. Be present at the Facility's training site on the dates and for the number of hours agreed upon; and
7. Not terminate his/her participation in the training experience at the Facility without first consulting with the College/University's instructor/lab assistant.

The Student also understands and agrees that:

- a. placement and participation in this training experience is not employment with the College/University or Facility;
- b. the Student is not covered by the College/University worker's compensation coverage; and
- c. the Student will not receive any money or compensation or benefits of any kind from the College/University in exchange for his/her participation in the training experience. Agency stipends, wages or any other forms of remuneration are not prohibited for students with approval from the College/University.

The Student also understands that the Facility does not promise or guarantee any future employment for the student.

The Student understands that he/she is responsible for providing his or her own health insurance and for any and all medical expenses incurred by him/her related to any injury, loss or illness sustained by him/her while participating in the training experience at the Facility.

Student's Signature: _____

Student's Name (please print): _____

Date: _____

Field Liaison Signature: _____

Date: _____

Minnesota State University, Mankato, part of the Minnesota State Colleges and Universities system, is an Equal Opportunity employer and educator.



APPENDIX 8 *(if applicable)*
Field Placement at Place of Employment
Department of Social Work
MSW Program

Student Name: _____

Name of Agency: _____

Administrator: _____

Current Supervisor: _____

Current title/duties (attach job description or provide narrative):

- ***Agency understands that the student must have duties and responsibilities other than current duties to meet the requirement for MSW field practicum.***

Yes_____ No_____

- ***Agency understands that supervision must be provided by someone with an MSW degree other than the current supervisor for duties and responsibilities of the field practicum.***

Yes_____ No_____

- ***If a MSW degreed person is not available at the place of employment, the agency agrees that a MSW from outside of the agency will provide additional supervision for the duties and responsibilities of the MSW field practicum.***

Yes_____ No _____

Agency Administrator/Designee signature:

_____ Date_____

Current Supervisor signature:

_____ Date_____

Student signature:

_____ Date_____

Field Liaison signature:

_____ Date_____



APPENDIX 9 (if applicable)
Off-site MSW Field Instructor Agreement
Department of Social Work
MSW Program

Student Name: _____

Name of Agency: _____

Current Supervisor/Credential: _____

Task Supervisor/Credential: _____

Off-Site MSW Field Instructor/Credential: _____

- ***The Agency and student understands that the Council on Social Work Education requires that supervision for MSW practicum students must be provided by a MSW credentialed social worker? Yes_____ No_____***
- ***If a MSW credentialed social worker is not available in the place of employment, the Agency agrees that an MSW credentialed social worker from outside of the agency (off-site MSW field instructor) will provide additional supervision for the duties and responsibilities of the MSW field practicum. Yes_____ No _____***
- ***The Agency and student agrees that a task supervisor (master's level preferred) will be assigned for day to day supervision, instruction, and management. Yes_____ No_____***

Agency Administrator/Designee signature: _____ Date _____

Current Supervisor signature: _____ Date _____

Off-site MSW Field Instructor _____ Date _____

Student signature: _____ Date _____

Field Liaison signature: _____ Date _____



APPENDIX 10 *(if applicable)*
Policy on Practicum/Intern Students and Transportation-Agency Form
 Department of Social Work
 MSW Program

Students in Department of Social Work (Department) field education placements (junior field internship, senior practicum, or graduate level practicum) are responsible for providing their own transportation to and from their field sites. In some very limited situations (e.g. international student without valid license, student with disability), students may request assistance from the Department to make other transportation arrangements.

Practicum students should not be expected to transport clients unless the Agency Field Instructor or Task Supervisor clearly communicates with the practicum student and field faculty liaison that such requirement is an essential duty of the practicum/internship at the beginning of placement. It is the responsibility of the agency to state whether practicum students are required to drive, travel, or transport clients as part of their duties and to manage any such requirements. Agencies that require practicum students to drive for agency business should verify that the agency's liability insurance policy covers interns driving and/or transporting clients either in an agency vehicle or the student's private vehicle. Agencies are asked to reimburse students for mileage if they use their own vehicles.

Practicum students are advised that agencies requiring driving/transporting may also require the student to submit to a Motor Vehicles Records check, notification of their own insurance carrier regarding use of the vehicle within the practicum, and compliance with all driving and client transportation policies of the agency. Clients should only be transported for specified agency business.

Minnesota State University, Mankato and the Department shall not be responsible for managing any requirements for transportation as part of practicum; does not maintain insurance for practicum student's driving or transporting clients in association with their practicum; and does not vouch for the student's driving record or valid driving license.

NOTE: This policy is subject to change. If it changes during the course of a practicum placement, the students and agencies involved will be informed by the Field Faculty Liaison. Agencies that require interns to transport clients should also make this known to the Department's Field Faculty Liaisons by signing and returning a copy of this signed policy form by third week of placement.

I/We, the undersigned, have read, understand, and agree to the above policy.

Agency Name		
Agency Administrator or Designee	Signature	Date
Field Instructor/Task Supervisor Name	Signature	Date
Student Name	Signature	Date
Field Faculty Liaison Name	Signature	Date

[End of MSW Field Practicum Application Packet]