

CHICAGO STATE UNIVERSITY

Master of Social Work Program

Application to Become a Field Practicum Site

Agency/School Name:		
Address:		
City:	State:	Zip Code:
Telephone:	Fax:	
Executive Director/Principal:		
MSW Field Instructor:		E-Mail:
Title:		Phone:
Contact Person:		E-Mail:
Title:		Phone:
Agency/School Website:		
Does the agency have evening hours? Please list hours. Yes () No ()		Weekend Hours? Please list hours Yes () No ()

Agency/School Information: Please provide a brief description of your agency/School.

Identify the categories of internship opportunities that are available at your agency:

1. ___ Aging/gerontological Social Work	11. ___ Housing Services
2. ___ Alcohol, Drug or Substance Abuse	12. ___ International
3. ___ Child Welfare	13. ___ Mental Health or Community Mental Health
4. ___ Community Planning	14. ___ Program Evaluation
5. ___ Corrections/Criminal Justice	15. ___ Public Assistance/Public Welfare (not child welfare)
6. ___ Developmental Disabilities	16. ___ Occupational
7. ___ Domestic Violence or Crisis Intervention	17. ___ Rehabilitation
8. ___ Family Services	18. ___ School Social Work
9. ___ Group Services	19. ___ Social Policy
10. ___ Health	20. ___ Other (describe _____)

Field Practicum Description: Please describe the type of assignments and learning opportunities available for students. Please note that CSU students specialize in 1) Program Planning and Administration, 2) Family Centered Direct Practice or 3) School Social Work.

Date Submitted _____

Please use additional space if needed. Return application to Nadine Harris Clark, Director of Field Education, Chicago State University, 9501 S. King Drive, SCI #116A, Chicago, IL 60628, NClark@csu.edu.