# CHICAGO STATE UNIVERSITY
## Master of Social Work Program
### Field Instructor/Task Supervisor Information

<table>
<thead>
<tr>
<th>Name:</th>
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<tbody>
<tr>
<td>Title:</td>
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<tr>
<td>Agency/School Name:</td>
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<tr>
<td>Work Address:</td>
<td>Zip Code:</td>
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<td>Work Phone:</td>
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<tr>
<td>E-Mail Address:</td>
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<tr>
<td>Home Address:</td>
<td>Zip Code:</td>
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1. Do you have an MSW degree from an accredited school of Social Work?
   - Yes (  ) No (  )
2. Indicate number of years post MSW work experience.
   - (  ) <2 years  (  ) 2-4 years  (  ) 5-7 years  (  ) 8 years or more
3. Do you have a current license to practice Social Work in the state of Illinois?
   - Yes (  ) No (  ) License #
4. Education (Please list all degrees)
   - Degree:
     - Institution:
     - Date of Completion:
   - Degree:
     - Institution:
     - Date of Completion:
5. Please list prior Social Work experience:
   - Position  Agency  Begin/End
6. List experience in supervising field practicum students:

Revised August 26, 2009
7. Have you attended an Orientation for Field Instruction? Yes ( ) No ( )

8. List staff supervisory experience:

Optional: Attach copy of resume or complete this form