

	<p>School of Social Work          Practicum Education Program          5500 University Pkwy          San Bernardino, CA 92408          (909) 537-5501  <a href="http://socialwork.csusb.edu">http://socialwork.csusb.edu</a></p>	<p><b>EMPLOYMENT-BASED          PRACTICUM PLACEMENT          APPLICATION</b></p>
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## **PURPOSE:**

An **Employment-Based Practicum Placement Application** must be completed if there is a request to complete practicum at the place of employment.

## **SECTION 1:**

Type or print legibly. Complete this application in full and submit a signed copy to your Practicum Coordinator for initial review. Final approval must be granted by the CSUSB School of Social Work, Director of Practicum Education or designee.

### **Student Information**

<b>Last Name, First Name (M):</b>		
Student ID #:		
Phone:		
Alternate Phone:		
Email:		
Level of Student: <input type="checkbox"/> BASW/MSW Generalist Year <input type="checkbox"/> MSW Specialized Advanced Generalist Year		

### **Agency Information**

Agency:
Program:
Address:
City, State, Zip:
Agency Main Phone:
Agency Email:
Agency Contact:
Contact Phone:
Contact Email:

## SECTION 2:

Review the general criteria for Employment-Based Practicum Placements prior to moving forward with the application.

1. **Request:** I am requesting to use my place of employment as a practicum placement site.
2. **Supervision:** An MSW or LCSW (required if the internship position requires a license) with at least 2 years of experience—and a minimum of 6 months at the agency—will oversee my practicum placement and serve as my practicum instructor (agency supervisor).
  - Student must have **1 hour of individual supervision every week**. Triadic and/or group supervision do not meet this requirement.
  - The practicum instructor (agency supervisor) will **not** be my employment supervisor.
  - Exceptions must be approved by the University and the agency.
3. **Supervisor Training:** The prospective practicum supervisor meets—or agrees to meet—the CSUSB MSW Program requirement of completing an 8-hour asynchronous Practicum Instructor (Agency Supervisor) Training prior to the intern start date.
4. **Tasks/Assignments:** My practicum tasks and assignments will be **substantially different** from my regular employment duties and will align with the School of Social Work's practicum education criteria, as well as my chosen area of interest.
5. **Educational Alignment:** My practicum instruction will be at a level appropriate for my program of study (BASW, MSW Generalist, or MSW Specialized Advanced Generalist).
6. **Scheduling:** The placement will occur during sustained blocks of time each week (minimum of 4 consecutive hours), preferably at a location different from my regular work setting.
7. **Important Notes:**
  - If your situation does not meet **all** the criteria above, you will not qualify for an employment-based practicum placement site.
  - All application packets must be approved by the CSUSB School of Social Work Director of Practicum Education or designee.
  - Students applying for employment-based or job-related practicum placements must still complete a practicum application.
  - **If the agency does not currently have an affiliation agreement with the university, the agency will be required to develop one for the employment-based practicum to be approved. All applications need to be submitted in the Fall for current students and discussed during the pre-practicum placement meeting for incoming students.**

## SECTION 3:

Check the type of employment-based practicum you are requesting.

- ☐ **1-year Employment-based Practicum:** (Please check the item that is most applicable.)
  - Student is using their employment site during regular working hours as a practicum placement site.
  - Student is an employee but will complete practicum requirements outside of their regular work part-time/full-time work hours and will not be considered an employee during practicum hours.
  - Student is taking a leave of absence from their employment and will not be considered an employee while completing their practicum requirements at their previous place of employment.

- ☐ **2-year Employment-based Practicum:** Student is using their employment site during regular working hours as a practicum placement site. (An Employment-based Practicum Placement Supplemental Form will be required for the 2<sup>nd</sup> year placement.)
- ☐ **Job-Related (new employment as Practicum):** Student is using a new employment role (less than 1 year at) as the educational, competency-based practicum placement.
- ☐ **Other:** \_\_\_\_\_

## SECTION 4:

Please complete the required schedule below and attach the required current employment job description and practicum description.

**Employment & Practicum Schedule:** Please complete the schedule below and differentiate the hours of employment and practicum hours. This is required for all employment-based requests. For example, 8:00am-5:00pm or 12:00-5:00pm.

Day	Employment Hours	Practicum Hours
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

### • **REQUIRED ATTACHMENTS:**

- **Current Employment Job Description.**
- **Practicum (Internship) Description** – include the following details:
  - Please detail the practicum tasks and roles or submit the job description for the role you will be learning as an intern.
  - If your practicum occurs on weekends or after regular business hours, clearly indicate **who will be supervising you during those times** including the task supervisor and point of contact. \*If you have a task supervisor or preceptor, please include the name and contact person in the practicum (internship) description.
  - **Note:** Practicum hours must be **distinct and separate** from employment hours, with different responsibilities, supervision, and focus

## SECTION 5:

### Acknowledgement and Signatures

- ☐ **Student Acknowledgement:** I acknowledge that participating in an employment-based practicum can result in a potential loss of practicum, if the agency cannot comply with program requirements, during unforeseen circumstances, which can impact my ability to move forward in the program. I acknowledge if I lose my job or elect to leave my place of employment, I am not guaranteed a new practicum during the same academic year, which could result in a Leave of Absence. I agree with the

university discussing my progress, which might relate to my employment, while participating in an employment-based practicum. I elect to participate in an employment-based practicum in full knowledge of the inherent risks.

By our signatures below, we certify that we have reviewed and agreed to the employment-based practicum placement requirements of the CSUSB School of Social Work. We agree with, and will support, the student's practicum at the agency of employment.

Signatures must be provided by the designated authority at the agency and attest to the accuracy and validity of the attached job description and practicum description.

### Signatures:

<b>Student Signature:</b>
Printed Name:
Date:

<b>Agency Practicum Instructor (Supervisor) Signature:</b>
Printed Name & Title:
Date:
Contact Phone:
Contact Email:
Credential (i.e. MSW/LCSW):

<b>Agency Employment Supervisor Signature:</b>
Printed Name & Title:
Date:
Contact Phone:
Contact Email:

<b>Designated Agency Authority (if different) Signature:</b>
Printed Name & Title:
Date:
Contact Phone:
Contact Email:

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☐ *Approved*   ☐ *Not Approved*   By: \_\_\_\_\_

☐ *Date:* \_\_\_\_\_

*Reason if NOT approved:*

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