

 <p>CALIFORNIA STATE UNIVERSITY <b>SAN BERNARDINO</b></p> <p>School of Social Work</p>	<p>School of Social Work Practicum Education Program 5500 University Pkwy San Bernardino, CA 92407 Phone:(909)537-5501 <a href="http://socialwork.csusb.edu">http://socialwork.csusb.edu</a></p>	<p><b>Practicum Instructor Information Form</b></p>
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**INSTRUCTIONS:** This form is to be completed by all Practicum Instructors. Please sign, attach resume, and submit to [sw.practicum@csusb.edu](mailto:sw.practicum@csusb.edu).

Please complete the following information:

**Section 1: Practicum Instructor Contact Information**

Last Name:		First Name:		MI:	
Agency:					
Program/Site:					
Address:		City:	State:	Zip:	
Work Phone:		Alt Phone:		Email:	

**Section 2: Education**

Institution	Professional Degree	Date Degree Received

**Section 3: Other Credentials/Licenses**

Please check all that apply. Practicum Instructors are required to have a minimum of 2 years of experience post MSW degree.

LCSW #	Year Received	LMFT	Year Received	ACSW	Year Received
PPSC	Year Received	Other (Please Specify)		Year Received	

#### **Section 4: Social Work Experience**

**If your resume is attached, skip Section 4 and complete Section 5.**

Name and Location of Agency	Position	Dates Worked
Description of Duties/Responsibilities		
Name and Location of Agency	Position	Dates Worked
Description of Duties/Responsibilities		
Name and Location of Agency	Position	Dates Worked
Description of Duties/Responsibilities		

#### **Section 5: BASW/MSW Student Supervisory (Practicum Instructor) Experience**

Name and Location of Agency Where Supervised Student		
From which University	# Years	Last Date Supervised
Name and Location of Agency Where Supervised Student		
From which University	# Years	Last Date Supervised
Name and Location of Agency Where Supervised Student		
From which University	# Years	Last Date Supervised
Name and Location of Agency Where Supervised Student		
From which University	# Years	Last Date Supervised

Discuss practice models, theories & techniques you commonly use in your practice

Discuss training, teaching style & the activities you will use in working with students

## **Section 6: Practicum Instructor Training**

I have provided practicum instruction to BASW and/or MSW student(s) within the past 5 years.

I have taken the 8-hour practicum instructor training from an accredited Social Work program within the Southern California Schools of Social Work.

If YES, please list the university and date. Attach a copy of the Certificate of Completion.

\_\_\_\_\_

I have taken the 8-hour practicum instructor training from an accredited Social Work program outside the Southern California Schools of Social Work

If YES, please list the university and date. Attach a copy of the Certificate of Completion.

\_\_\_\_\_

Print Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I understand that by typing my name in the signature field above it will be accepted as my valid signature.

Please submit your resume and Certificate of Completion to [sw.practicum@csusb.edu](mailto:sw.practicum@csusb.edu)