## Texas College Social Work Program 2404 North Grand Ave Tyler, Texas 75702 (903) 593-8311

## APPLICATION FOR FIELD INSTRUCTION (SOCW4601/ SOCW4622)

Please type or use blace enroll in senior field in			icate the semester that you plan
enrou in senior fieia ii	(Se	emester) (Year)	
Student's Full Name:			
DOB:	(First)	(Middle)	(Last)
Student ID Number: _			
Phone: ()		Email:	
Permanent /Family Ph	one: ()		
Current Mailing Addre	ess:		<del></del>
	(Street or	P.O. Box)	
(City)	(State)		(Zip Code)
Permanent Mailing Ac	ldress:		
J		or P.O. Box)	
(City)	(State)		(Zip Code)
Name of Advisor:			
			anor or felony? YesNo
A. Volunteer experie	nce related to soc	ial work:	
Agency/Progra	ım	Date	Nature of Experience

Location	Date	Nature of Experience
C. Areas of Interest:		
	Check those categories which	client groups with which profession h represent your major interests at
Services for special age group (1) pre-school age children (2) school age children (3) adolescents (4) adults		
(4) addits (5) aging		
Services for communities: (6) rural communities; (7) suburban/urban commu	unities.	
Services related to problems/s  (8) child welfare  (9) family services  (10) juvenile services  (11) school/education  (12) criminal justice	(14) men (15) mind (16) phys (17) low s (18) deve	orities/oppressed groups sical disabilities income individuals/families elopmental disabilities
(13) health		r
	rimary areas of interest as ic	dentified from List C.
D. Please prioritize your property of the Please prioritize your property your property of the Please prioritize your property your property of the Please property your propert	2nd	3rd

G.	Yes No				
G.	If you are placed outside of Smith County, what locality would you prefer?				
H.	Is there a specific agency in which you desire to have your placement?  YesNo				
	If yes, give the name, address, and telephone number of the agency:				
Educ	ational and career interests  Please answer the following questions as fully as possible:				
1.	What personal and professional strengths will assist you in your field instruction?				
2.	What educational and/or professional needs do you desire to address through the field instruction experience?				
3.	What are your career goals?				
4.	Provide any additional information which would be helpful in planning your finstruction (e.g., description of prior experience, etc.). If additional space is needed us additional page.				
_	e my permission for the information contained in this application to be shared with so faculty members and Field Instructors who are involved with my field instruction placement.				
Date	Student's signature				

## DO NOT WRITE BELOW THIS LINE

	_ is assigned to the following fiel	d instruction site:
Agency/Program Name		
Address:		
Field Instructor:		
Faculty Liaison:		
Field Director:		