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**THE UNIVERSITY OF OKLAHOMA
ANNE & HENRY ZARROW SCHOOL OF SOCIAL WORK
PRACTICUM PROPOSAL & APPROVAL**

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| --- | --- |
| **Student Name:** | Student Name |
| **SWK Practicum Group Name:** | Student Group |
| **Agency:** | Agency |
| **Field Instructor:** | Field Instructor |

Please answer all questions. You will need assistance from your Field Instructor, and/or a Preceptor, in order to answer some of the questions below. Your Field Instructor will review and sign your completed proposal. Your proposal will require signatures from the following people: student, Field Instructor, and the Field Education Coordinator. Entering your signature will both SUBMIT your proposal to IPT, and also certify to the school that all of your answers are factual and accurate.

For students wishing to pursue the possibility of placement where they work, additional questions regarding employment-based practicum will appear when you answer ‘yes’ to the first question.
Note: You must click on the SAVE button to save any information entered or changed on this form before closing or printing the form or your information will be lost.

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|  | Will any part of your practicum take place within the system which employs you (this includes contract work)? If you select yes to this question, you MUST click the “Save Work” button to display the additional Employment-Based Practicum Proposal questions (questions 42-53)    |
|  | What type of practicum will you be completing? Traditional/Non-Paid Work Study (undergraduate degree only) Employment-Based Paid Practicum Stipend Recipient |
|  | In which format are you conducting your practicum:(check box)[ ]  1 semester[ ]  2 semesters |
|  | What is the name of the practicum SITE you are proposing?  |
|  | If applicable, please state the name of the specific program(s), hospital unit(s), etc. where you will be in practicum.     https://www.alceasoftware.com/web/image/icon_edit.gif |
|  | Please list the address for the building where your practicum agency is located.     https://www.alceasoftware.com/web/image/icon_edit.gif |
|  | Very briefly describe the practicum setting(s), the population you will be working with, and the nature of the work that takes place there.     https://www.alceasoftware.com/web/image/icon_edit.gif |
|  | Will your placement involve a rotation (not visiting or shadowing) to another site during the practicum? If yes, please describe.    https://www.alceasoftware.com/web/image/icon_edit.gif |
|  | If your placement will involve rotation, will you have a different Field Instructor at the point you rotate?  |



**Proposed Practicum Learning Experiences**

|  |  |
| --- | --- |
| 1.
 | \*\*Please review the following applicable Social Work Core Competency handout to answer this question:[BASW/MSW Foundation Year](https://www.ou.edu/content/dam/cas/socialwork/docs/fieldeducation/reference/Nine%20Core%20Comp%20%28FY-BSW%29.pdf)[MSW Concentration Year](https://www.ou.edu/content/dam/cas/socialwork/docs/fieldeducation/reference/Nine%20Core%20Comp%20etencies%28CY%29.pdf) \*\*Referencing the nine Social Work Core Competencies, describe the primary learning activities which are being planned for your practicum. You should organize your answer by competencies and list two site-specific learning activities for ALL NINE competencies (see example). You will need assistance from your Field Instructor, or a Preceptor, to do this. **EXAMPLE FORMAT**: Competency 1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Learning Activities: a.b.Competency 2: \_\_\_\_\_\_\_\_\_\_Learning Activities: a.b. |
|  | How do these proposed practicum learning experiences represent new learning for you?     https://www.alceasoftware.com/web/image/icon_edit.gif |
|  | Describe how you will have direct face-to-face contact with clients during this practicum.      https://www.alceasoftware.com/web/image/icon_edit.gif |
|  | Describe how you plan to have practice opportunities across each domain of:Individuals:Families:Groups:Organizations:Communities:    https://www.alceasoftware.com/web/image/icon_edit.gif |
|  | Will you be able to meet the expectations of a learning progression model, beginning as an observer, taking on more responsibility over time while demonstrating skill development, then demonstrating increased independence towards the end phase of practicum?  |
|  | Is the student is expected to provide transportation for clients? If yes, the student must agree to the safety policy as found in the Field Education Manual.   |



**Non-Traditional Practicum Hours**

|  |  |
| --- | --- |
| 1.
 | How many hours/week of your practicum will occur after 5pm and/or on weekends?  |
|  | Describe all practicum activities which will be occurring after 5pm and/or on weekends.     https://www.alceasoftware.com/web/image/icon_edit.gif |
|  | Who will provide supervisory guidance to you during these hours? https://www.alceasoftware.com/web/image/icon_edit.gif |



**Student Schedule**

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| --- | --- |
|  | What is your proposed practicum schedule (which days, times, etc.)? https://www.alceasoftware.com/web/image/icon_edit.gif |
|  | Do you have another job that you will be conducting in addition to practicum?If so, how many hours per week will you work at that job? |
|  | Core activities are site activities which are essential to the educational integrity of the practicum, i.e. experiences without which an understanding of social work practice at the site would be seriously compromised. Examples would be case conferences, multi-disciplinary team meetings, staff meetings, board meetings, significant community meetings, etc. These are usually venues where important conversations happen.Please list core activities which will be relevant to your practicum learning.     https://www.alceasoftware.com/web/image/icon_edit.gif |
|  | Will you be in attendance at your practicum during all relevant core activities?If not, please explain.     https://www.alceasoftware.com/web/image/icon_edit.gif |
|  | Will you be expected to begin your practicum early (before the beginning of the semester) or be in practicum during winter break?  |
|  | For the semester(s) that you will be in practicum, how many other course hours will you take?

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| --- | --- |
| Fall |  |
| Spring |  |
| Summer |  |

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**Practicum Supervision**

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|  | Who will act as your Field Instructor?  |
|  | What is your Field Instructor’s job title?  |
|  | Briefly, what are your Field Instructor’s current job responsibilities?    https://www.alceasoftware.com/web/image/icon_edit.gif |
|  | All Field Instructors must attend a current training. (The attendance date which fulfills this requirement is indicated on your Practicum Calendar). This training addresses the role of the Field Instructor as a University Educator who is delivering a competency-based social work curriculum. Placements are not approved unless your intended Field Instructor has already attended a current training. |
|  | I have given the dates of the upcoming instructor trainings to my Field Instructor, and they have agreed to attend one of the trainings.  |
|  | Please describe how your Field Instructor will be supervising your practicum hours (ie. in person, remotely, etc.).” https://www.alceasoftware.com/web/image/icon_edit.gif |
|  | Will your Field Instructor be on-site during all of your practicum hours? If not, please explain how supervision will be handled.     https://www.alceasoftware.com/web/image/icon_edit.gif |
|  | If your Field Instructor will NOT be working on-site at the practicum site, please answer ALL questions below:

|  |  |
| --- | --- |
|   | a. Where is your Field Instructor employed?    https://www.alceasoftware.com/web/image/icon_edit.gif |
|   | b. What is your Field Instructor’s connection to the practicum site, or to the work you will be doing in your practicum?    https://www.alceasoftware.com/web/image/icon_edit.gif |
|   | c. If your Field Instructor is NOT employed by the practicum site, who is the practicum site administrator who has authorized the involvement of a non-employee social worker in your practicum placement? Please provide name and title of this person.    https://www.alceasoftware.com/web/image/icon_edit.gif |
|   | A Preceptor must be built into your practicum supervision structure. See section below for Preceptor designation and training requirements. |

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|  | Do you have a personal or family relationship with the Field Instructor?  If yes, please describe.    https://www.alceasoftware.com/web/image/icon_edit.gif |
|  | Will your Field Instructor be available during the entire practicum? Please indicate any planned leave and identify a plan to address field instruction during this absence.     https://www.alceasoftware.com/web/image/icon_edit.gif |

**Preceptors**

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|  | Depending upon their role, some very centrally involved staff are designated as “PRECEPTORS.” (Some placements, depending upon the supervisory structure, and ALL placements involving off-site Field Instructors are required to have Preceptors.) Will a Preceptor be incorporated into your supervisory structure, or have you been advised that you must have a Preceptor in your placement?  |
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| 1.
 | If you will have a Preceptor involved in your Practicum, please enter their information below so they can be entered into IPT:

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| --- | --- | --- |
|   | a. Preceptor Name: |  |
|   | b. Preceptor Academic Degree: |  |
|   | c. Preceptor Job Title: |  |
|   | d. Preceptor Email Address: |  |

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|  | Preceptors must be willing to attend a training. Please answer the next three questions:

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|   | a. I have discussed the Preceptor training requirement with my Preceptor.  |
|   | b. My Preceptor has attended a current instructor training. (The attendance date which fulfills this requirement is indicated on your Practicum Calendar.)  |
|   | c. My Preceptor has agreed to attend one of these trainings.  |

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**Practicum Pay**

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|  | The OU Anne & Henry Zarrow School of Social Work is not responsible for any funding arrangements or allocation between a practicum site and the student. Will you be paid for ANY of your practicum hours? If yes, how many?  |
|  | During the semester(s) you are in practicum, will any portion of any money you receive for your practicum be based upon the amount or type(s) of services you provide during the practicum? If yes, please explain.     https://www.alceasoftware.com/web/image/icon_edit.gif |



**Site Reimbursement for Services Rendered During Practicum**

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| --- | --- |
|  | Will your practicum site be billing a private or public funding source for any of your practicum activities/services? If yes, please list specific SERVICE DESCRIPTIONS that will be billed.     https://www.alceasoftware.com/web/image/icon_edit.gif |
|  | Do any of these practicum activities/services require professional licensure? If yes, please explain how reimbursement will be handled.     https://www.alceasoftware.com/web/image/icon_edit.gif |
|  | Will you be expected to provide a minimum number of billable services/hours each week during the semester(s) you are in practicum? If yes, please list the specific SERVICE DESCRIPTIONS involved.     https://www.alceasoftware.com/web/image/icon_edit.gif |

**Proposal for Employment-Based Practicum Placement**

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| --- | --- | --- |
|   | Current Job Title |  |
|   | Current Work Supervisor |  |
|   | Work Supervisor’s Title |  |
|   | Phone Number of Supervisor |  |
|   | Email Address of Supervisor |  |
|   | Agency Administrator |  |
|   | Phone Number of Administrator |  |
|   | Email Address of Administrator |  |

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|  | Please identify the people at your employment who are assisting/ supporting you in creating a competency-based social work practicum placement.    https://www.alceasoftware.com/web/image/icon_edit.gif |



**Current Position**

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| --- | --- |
|  | How long have you been employed at this agency/facility?  |
|  | How long have you been in your current position?  |
|  | Total average hours worked in your current position each week.  |
|  | Describe activities that are part of your current employment responsibilities.     https://www.alceasoftware.com/web/image/icon_edit.gif |
|  | Attach a job description and a copy of your most recent performance evaluation. If your employer has no formal evaluation, or a formal evaluation has not yet been completed, a letter from your current employment supervisor may be substituted.

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|   | Job Description: [**View**](https://www.alceasoftware.com/web/form.php?file=ouswk_practicum_proposal_v4.html&labelfields=0)      |
|   | Performance Evaluation: [**View**](https://www.alceasoftware.com/web/form.php?file=ouswk_practicum_proposal_v4.html&labelfields=0)      |

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**Practicum Activities**

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|  | Describe in detail how your practicum activities will differ from your current (and previous) job duties.     https://www.alceasoftware.com/web/image/icon_edit.gif |
|  | How do you and your Field Instructor plan to protect the educational nature of your practicum experience?     https://www.alceasoftware.com/web/image/icon_edit.gif |
|  | Please describe any concerns you have about doing a practicum where you work and your plan to address this with your Field Instructor and/or work supervisor. For example, what are potential issues/conflicts in your roles as both student and employee; potential problems that could arise with your employment supervisor; concerns that your employer might evaluate you in a different light as a practicum student; concerns that you will be assigned work that will interfere with your practicum, etc.?     https://www.alceasoftware.com/web/image/icon_edit.gif |



**Practicum and Work Schedules**

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| --- | --- |
|  | How will you balance work and Practicum hours?     https://www.alceasoftware.com/web/image/icon_edit.gif |
|  | Will you be totally released from your current work responsibilities while fulfilling requirements of the practicum? If yes, will your current work responsibilities be covered by someone else? If not, how will you manage to fulfill job and educational responsibilities at the same time?     https://www.alceasoftware.com/web/image/icon_edit.gif |



Student Signature: 
I have reviewed all of my answers in this proposal, and my answers are factual and accurate.

Field Instructor Signature: 
I have reviewed this practicum proposal, I approve this placement, and I agree to act as Field Instructor for this student. I certify that if a Preceptor is required in this placement, I have included the Preceptor in the review and approval of this practicum proposal.

Field Education Coordinator Signature: 

Preceptor Signature: 

Your practicum placement will NOT be finalized and approved until all practicum requirements are met and you have secured ALL necessary signatures, including the Field Education Coordinator.

Note: You must click on the SAVE button to save any information entered or changed on this page before closing or printing the page, or your information will be lost.

          

[Printable Version](https://www.alceasoftware.com/web/form.php?file=ouswk_practicum_proposal_v4.html&labelfields=0)

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