

To be completed by the Supervisor:

Supervisor Name: _____ Title/Degree (if any): _____

Relationship(s) to Applicant (if other than professional): _____

Agency Name: _____ Phone: _____

Agency Address: _____

Please describe:

- the agency and its primary services:

- activities in which the student will participate (should be primarily related to social work activities):

- client population to be served and how much contact student will be able to have with clients (required to have some):

- opportunities to see programs and nonprofit or social service organizations operations (desirable):

Please provide the estimated number of hours to be completed at this setting (subject to advisor approval): _____

The supervisor is asked to document the student's participation and to return a separate reference form on the student's prospects as a potential social worker at the completion of this experience.

Signature of Supervisor: _____ Date: _____

To be completed by the Applicant:

Name of Applicant (print): _____ Date: _____

Note: One hundred (100) hours are required in not more than two (2) settings. If social work related experience is completed in more than one setting, a separate approval form must be completed for the additional setting. A student **MUST** be approved to receive credit for an experience. At least 50 hours must be completed by the end of the semester in which the student applies for the social work program. Any remaining hours must be completed prior to enrolling in SWK 321.

This form may be submitted by the student or the supervisor to:

Susan Grettenberger, Social Work Program
034 Anspach
Mount Pleasant, MI 48859
Phone: (989) 774-2690
Fax: (989) 774-2140
E-mail: swk@cmich.edu

To be completed by the CMU Social Work Advisor:

Number of hours approved for this setting: _____ Faculty Approval: _____ Date: _____

Comments: