University of Utah
College of Social Work
M.S.W. Program

Optional Practicum Commitment [SW 6500]
APPROVAL FORM

Student Name	Supervisor Name	Agency Name - Director

Semester (Circle One): Fall Spring Summer Academic Year: _____

Number of Hours to be Completed: _____

(One Credit Hour Equals 75 Clock Hours of Service)

Supervision Hours: _____

(One Hour of Supervision is Required for each 16 to 20 Hours of Service)

Starting Date	Hours per Week	Expected Completion Date

Instructions: Approval Form must be completed, signed by Student and Field Instructor, and approved by Practicum Coordinator BEFORE the Optional Practicum Begins. Evaluation Form must be completed, signed by Student and Field Instructor, and approved by Practicum Coordinator BEFORE credit can be recorded.

I. Identify specific learning goals to be achieved and the methods for achieving these goals.

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II. Identify how the achievement of the identified goals will be measured.

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Student Signature	Date	Field Instructor	Date	Practicum Coordinator	Date

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EVALUATION FORM

Describe how successful the student has been in achieving the identified learning goals for this optional practicum:

Student Signature Date Field Instructor Date Practicum Coordinator Date

RECOMMENDED GRADE (Circle One) Credit No Credit Credit Hours Assigned _____