

# MEMORANDUM

**To:** Students placed in School and School related services  
**From:** Larry Smith, School of Social Work Coordinator  
**Date:** Academic Year 2006/2007  
**Subject:** School Social Work Certificate

An applicant for the Basic School Social Worker Certificate must have completed an approved program for the preparation of School Social Workers including a Master of Social Work degree from an accredited institution and completed an approved school social work internship in a school setting. If a student is placed in an agency that provides school social work as part of its services, the student must provide on-site school-based services for a minimum of 300 hrs. All agency-based school social work internships must be approved by the School Social Work Coordinator in order to be eligible for the school internship requirement. (Please see the M.S.W. student handbook for certification requirements).

Students currently placed in a school setting or in an agency providing school-based social work services, must complete the following form, and have it signed by their clinical instructor and your practicum coordinator. *Students will not be eligible for school certification in the future without this documentation.* Please return this form to Wanda Brown in the MSW Field Education Office, Rm. 319.

## **Agency-based School Social Work Internship Approval Form**

An Applicant for the Basic School Social Worker certificate must have completed an approved program for the preparation of School Social Workers including a Master of Social Work degree from an accredited institution and completed an approved school social work internship in a school setting. If a student is placed in an agency that provides school social work as part of its services, the student must provide on-site school-based services for a minimum of 300 hrs. All agency-based school social work internships must be approved by the School Social Work Coordinator in order to be eligible for the school internship requirement.

Students currently placed in a school setting or in an agency providing school-based social work services ,must complete the following form and have it signed by their clinical instructor and their practicum coordinator. Students will not be eligible for school certification in the future without this documentation. Please return this form to Wanda Brown, MSW Field Education Office, Room 319.

# Agency-based School Social Work Internship Approval Form

STUDENT NAME \_\_\_\_\_

AGENCY \_\_\_\_\_

LOCATION \_\_\_\_\_

SCHOOL DISTRICT \_\_\_\_\_

DATES OF SCHOOL-BASED EXPERIENCES \_\_\_\_\_ TO \_\_\_\_\_

CLINICAL INSTRUCTOR \_\_\_\_\_

NUMBER OF HOURS PER WEEK AT SCHOOL SITE \_\_\_\_\_ TOTAL # OF HRS. \_\_\_\_\_

CHECK THE FOLLOWING AREAS THAT APPLY TO YOUR PRACTICUM EXPERIENCE.

- |   |   |
|---|---|
| <input type="checkbox"/> Classroom presentations        | <input type="checkbox"/> School-based inservice                                 |
| <input type="checkbox"/> Groups                         | <input type="checkbox"/> IEP plans (individual education plans)                 |
| <input type="checkbox"/> Individual counseling sessions | <input type="checkbox"/> Comprehensive Guidance Program                         |
| <input type="checkbox"/> Family meetings                | <input type="checkbox"/> Self-contained classroom (social emotional behavioral) |
| <input type="checkbox"/> FACT meetings                  | <input type="checkbox"/> School-wide prevention programs                        |
| <input type="checkbox"/> School/work activities         | <input type="checkbox"/> Youth in custody program                               |
| <input type="checkbox"/> Truancy                        | <input type="checkbox"/> Teen parent program                                    |
| <input type="checkbox"/> School-linked services         | <input type="checkbox"/> Community organization                                 |
| <input type="checkbox"/> Program administration         | <input type="checkbox"/> Other, please describe _____                           |

Briefly describe your school-based practicum experience, including setting,(elementary, jr. high, high school, alternative) anticipated total hours on site at the school and your primary roles.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student signature \_\_\_\_\_ Practicum Coordinator \_\_\_\_\_

Clinical Instructor \_\_\_\_\_

School Social Work Coordinator \_\_\_\_\_ Date \_\_\_\_\_