# WVU SCHOOL OF SOCIAL WORK/FIELD EDUCATION PROGRAM MSW ADVANCED FIELD PLACEMENT INTERVIEW AND RANKING FORM

Name: WVU ID # Preferred Contact Phone Number: MIX: @mix.wvu.edu

**Practice Track**: \_ Direct Practice Community Organization/Social Admin. Start? Sum \_\_\_\_Fall

I. Social work learning objectives/career goals. Briefly state your current personal and professional social work career objectives, include specific practice settings, agency types, and population(s).

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**II**. **Field Placement Site Interview Information** Date(s) of Interview

* 1. Agency/Program
  2. Agency Address

# To be completed Post Interview:

* 1. Phone
  2. Names of Agency Staff Present During Interview:
  3. Please describe your proposed activities in the field placement agency, and how they fit with your identified learning objectives. If you are currently employed in the social work field in some way, explain how your field placement opportunities will be different from those typically expected in your employed position.
  4. Preference Rank:

7a. Accepted for Placement?

7b.Declined for Placement?

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   1. Agency/Program
   2. Agency Address

3. Phone

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2. Please describe your proposed activities in the field placement agency, and how they fit with your identified learning objectives. If you are currently employed in the social work field in some way, explain how your field placement opportunities will be different from those typically expected in your employed position.

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Preference Rank: 7a. Accepted for Placement? 7b. Declined for Placement? \_\_\_\_\_

**Certification of Eligibility Conditions to Enter Field Placement**

**By signing below, I certify that I understand that I must meet all of the eligibility to start my field placement, which includes having a minimum GPA of 2.75; verification of having completed, with a grade of “C” or above, all of the perquisite courses, and having cleared any grades of “I” or “NR” from my record.**

**Student Signature Date**

**By signing below, I certify that I personally met with the above-named student to discuss her/his field placement learning goals and objectives and the best field site options for same, that we have discussed the eligibility criteria for beginning the field placement, and that I concur with the student’s choice(s) for placement.**

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**Academic Advisor Date**

**Morgantown Students:** Upon completion of this form and when both signatures are affixed, submit form to the Field Coordinator.

**Extended Campus Students:** Upon confirmation of placement acceptance, indicate by checking Item #7a on form, submit form to Extended Campus Coordinator.