



Department of Social Work
Florida Gulf Coast University

MSW FIELD APPLICATION – FOUNDATION

INSTRUCTIONS: This application must be typed and submitted to the Field Coordinator at: navega@fgcu.edu as an email attachment or by fax at: (239) 590-7758. To have a hard copy, print and then complete the form.

Student Submitting Application:

Date:

SUPPLEMENTAL MATERIALS: The Field Education Coordinator attempts to select recommendations for field placement based upon the supplemental materials that are submitted as well as other parts of this application. To facilitate this process, you must submit with your application:

1. An up to date resume;
2. A Narrative Statement limited to 500 words addressing the following three areas:
 - a. the most significant life experience(s) that have led you to choose working with this population in you undergraduate social work field internship;
 - b. your short and long-term career goals; and
 - c. your overall learning objectives for this year's field experience. This statement must be typed and double spaced on separate paper.

Be sure to review the material prior to submitting them to the Field Coordinator, Nicole Navega at navega@fgcu.edu incomplete applications will only delay your admission to field.

Briefly discuss previous experience with vulnerable populations (i.e., the poor, people of color, older adults, developmentally or physically challenged individuals, persons living with HIV/AIDS, gays & lesbians, immigrants, women).

Do you plan to be employed while in field placement? Yes No

Where? Number of hours per week?

If working 20 hours a week or more, specify what arrangements will you make with your current employer for time to attend classes (one day a week) and for field placement (approximately 16 hours a week. **Exclusively evening/weekend placements are rarely available.**

Will you have the use of a car during your field placement? Yes No

If "Yes," do you have liability insurance on this vehicle? Yes No

If "No," how will you get to/from the field agency?

Some agencies may require travel (i.e. home visits). Are there any restrictions on your ability to travel on agency business?

Do you have knowledge of a language other than English? Yes No

If "Yes," specify

Rate your fluency in that language?

Speaking:	Beginner	Intermediate	Advanced
Reading:	Beginner	Intermediate	Advanced

INTEREST/AREA PREFERENCE

Which is more important to you? Field of Practice Geographic location Where
 Explain:

Indicate below your practice interests in **rank order (first, second, third)**. Select areas of interest from the following:

Advocacy	Aging/Gerontological
Child Welfare	Developmental Disabilities
Domestic Violence/Violence	Family Services
Integrative Health & Mental Health Care	Public Assistance/Public Welfare
School Social Work	

Students should refer to the BSW Field Education webpage on the Department website located at <http://www2.fgcu.edu/mariebcollege/SocialWork/BSW/AgencyWebPages.html> to view a list of possible agencies from which to choose. Please use this directory for clarification of which agencies fall under the above practices.

If you are interested in working with a particular population or in a particular field of practice and it does not appear on the list above, elaborate here. Include the rank order.

Is there any additional information you want to provide with regard to populations you would like to work with during this placement?

Briefly, state any additional information or preferences you would like the Field Education Coordinator to consider in making a determination regarding your placement assignment.

Student preferences are taken into serious consideration when assigning field placements. Other factors are also considered including availability, geography, etc.

Do you have a documented disability requiring accommodations? Yes No

If yes, please contact the FGCU Office of Adaptive Services (OAS) at 239-590-7956.

Accommodations cannot be provided unless the student has registered with OAS. It is the student's responsibility to register.

This application and supporting material will be available to the agency upon request. Your signature indicates that you understand that this information will **NOT** be kept confidential.

Student Name (Print)

Student Signature

Date

**Florida Gulf Coast University
Department of Social Work
Bachelor of Social Work Program**

Legal Disclosure Statement

For field placement purposes it is necessary that you disclose any records expunged pursuant to applicable law. If you answer yes to any of the following questions, you must fully disclose all incidents in a separate sheet of paper. By doing so, you can avoid any risk of disciplinary action or revocation of an offer of admission or rejection by any field placement. You may be required to provide the BSW program with copies of all official documents explaining the final disposition of the proceedings. This information is confidential; any action taken will first be discussed with you.

- 1) Have you ever been charged with a violation of the law (misdemeanor or felony) which resulted in, or, if still pending, could result in, probation, community service, incarceration, or the revocation or suspension of your driver's license (including traffic violations which resulted in a fine of \$200.00 or more)?

Yes	No
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- 2) I understand that if there are currently any pending criminal charges against me in any jurisdiction this may make me ineligible for admission to the FGCU Department of Social Work Master of Social Work Program, and/or an agency placement for Field Education. Further, should I fail to disclose such pending legal action I understand that FGCU may be obligated to take immediate action to terminate me from my program of study.

- 3) I understand that a history of criminal conviction may negatively impact the ability of the Department of Social Work to place me with an agency for the purposes of completing my field education requirements.

- 4) I understand that it is my responsibility to disclose information regarding all prior adult convictions and/or criminal penalties to the department and any agency where I may be placed for field education purposes and that failure to be forthcoming with this information, can result in dismissal from the agency and disciplinary action by FGCU and the Department of Social Work.

- 5) I understand that in Florida a felony history may make me ineligible to become a licensed social worker. For further information, contact the Florida Board of Clinical Social Work, Marriage and Family Therapy, & Mental Health Counseling, 4052 Bald Cypress Way, BIN #C08, Tallahassee, FL 32399, Telephone: 850-488-0595.

- 6) Additionally, I understand that it is my responsibility to disclose to the Field Education Coordinator information regarding any possible conflict of interest that may exist between myself and an agency where I may be placed for field placement; whether this be pre-existing or whether it occurs following agency assignment for the purposes of field placement. Failure to be forthcoming with this information can result in dismissal from the agency and disciplinary action by FGCU and the Department of Social Work.

Name (print):

Signature:

Date:

**Florida Gulf Coast University
Department of Social Work
Bachelor of Social Work Program**

Application Certification Statement

By signing this statement, I certify that:

- 1) I understand that this application is for field placement with an affiliated agency only and is valid for the term indicated.
- 2) I understand and agree that I will be bound by the FGCU BSW Program and University regulations concerning admission requirements as published in the FGCU Catalog for 2017 – 2018.
- 3) I understand that admission to the program is competitive and that this application does not ensure my admission to the Baccalaureate of Social Work Program at FGCU.
- 4) I certify that all the information given in this application is complete, accurate, and true, and if admitted, I hereby agree to abide by the policies of the Board of Trustees and the rules and regulations currently found on the FGCU website (<https://www2.fgcu.edu/generalcounsel/regulations.asp>)
- 5) I authorize the release of information concerning my academic progress to educational institutions for research study purposes.
- 6) I will notify the Admissions Office of any changes in the information I have given prior to my entry into the University.
- 7) I understand that I may need to secure professional liability insurance prior to my placement in the field internship.

Name (print):

Signature:

Date: