

**THE UNIVERSITY OF TENNESSEE COLLEGE OF SOCIAL WORK
BSSW PROGRAM
PRACTICUM APPLICATION**

Please complete this practicum application.

Submit the completed application to Practicum Coordinator on or before due date.

- Due date is **October 1st** to begin practicum in spring semester.
- Due date is **March 1st** to begin practicum in summer or fall semester.

Please indicate below when you will enroll in Junior Practicum **SOWK380N**.

Spring _____ Summer _____ Fall _____

*If junior practicum is completed in fall semester, senior **BLOCK** practicum is **required** in the following spring semester. Block practicum is completing ALL senior practicum hours (400) in one semester.*

Junior and Senior practicum are completed in one agency.

Please note: All students must meet with their Practicum Coordinator for a Professional Mock Interview and complete Orientation & Personal Safety Training before beginning practicum.

Name _____ Pronouns _____ Date _____

Cell Phone _____ UTK Email Address _____

Address: _____

(Address where you will be living while in practicum)

City: _____ State: _____ Zip: _____

Employment History and/or Volunteer Experience, beginning with most recent:

Organization: _____ Dates: _____

Organization: _____ Dates: _____

Will you be employed during the semesters that you are in practicum?

Yes → How many hours per week do you plan to work? _____

No

Students must provide their own transportation to and from their placement. Students without access to a vehicle will have very limited options for their placement.

Do you have transportation to your practicum? Yes No

What are your strengths and what skills will you bring to your placement?

Briefly explain any circumstances which might have an effect on your placement.

Any student in need of disability related accommodations in practicum should contact the Student Disability Services on the Knoxville Campus (<http://ods.utk.edu> or (865) 974-6087). In order to receive accommodation during practicum, students must be registered with SDS.

Initial here to acknowledge that you have received this information. _____

Background and Health Checks: An agency may require security clearance resulting in background checks, fingerprinting and/ or drug screens. An agency may require physical examinations, TB tests, immunization verifications, and/or random drug screens. Such clearance may be at the student’s expense.

Initial here to acknowledge that you will consent to these agency requirements as conditions of your placement confirmation: _____

Have you ever been convicted of any offense other than a minor traffic violation? Yes No

If yes, please explain below. **Have you ever had any legal involvement that may negatively impact your acceptance for placement at a social service agency?** Yes No If yes, please explain below.

(Please note that failure to provide accurate information may result in loss of placement opportunities and possible dismissal from the program.)

Indicate the type of practicum setting or a population that interests you the most. List your top three choices for placement:

First Choice: _____

Second Choice: _____

Third Choice: _____

I understand that I will be in my practicum at least two days per week throughout each practicum course. I will be required to arrange my hours to accommodate practicum. I understand there is no guarantee that I will receive a particular placement. I understand practicum placements will require attendance during regular business hours.

Initial here to acknowledge that you have received this information. _____

Student Placement Contract

All students are expected to follow all policies and procedures as outlined in the Practicum Manual. Prior to beginning a placement, students are expected to sign the following contract indicating their understanding of an agreement to adhere to these policies and ethical standards. Signature is at the end of this practicum application.

As a student enrolled in a Practicum Education course, I agree to the following:

1. To consistently demonstrate professional and ethical conduct. This includes, but is not limited to, adhering to the NASW Code of Ethics and the College of Social Work Standards of Professional Conduct. **Initial here** _____
2. To keep confidential all information about clients served by the agency that I obtain as a part of my work in my practicum agency and/or that I obtain as a part of any research project I engage in while working in my practicum agency. **Initial here** _____
3. To comply with confidentiality and privacy standards during seminar regarding all issues raised by peers, including personal and professional disclosures. **Initial here** _____
4. To comply with the policies, procedures, programs, and operating standards of the organization to which I am assigned for placement, including timely completion of all documentation and disclosure of health status and/or legal history as required by the organization. **Initial here** _____
5. To initiate and engage in academic and professional social work development through active participation in seminar, weekly practicum supervision, and self-assessment of my academic and personal aptitude, knowledge, skills, performance, and values. **Initial here** _____
6. To accept supervision and instruction by the organization representative(s) designated as my agency Instructor and/or Task Instructor (as applicable). **Initial here** _____
7. To secure authorization from my agency Instructor for use of any agency materials or records prior to using them in academic coursework. **Initial here** _____
8. To complete a Student Evaluation of Practicum Practice. **Initial here** _____
9. I understand I am responsible for reading and following all practicum policies and procedures as stipulated in the BSSW Practicum Manual. Prior to entering practicum, I will review the contents of the Practicum Manual, with special emphasis on the following sections: **Initial here** _____
 - a. Roles and Responsibilities in Practicum
 - b. Procedures during agency Placement
 - c. Problems in Practicum

I agree to know and adhere to policies and procedures of the Practicum Program as outlined in the Practicum Manual. I understand as a practicum student I am expected to adhere to the values, ethics, and standards of the social work profession. **Initial here** _____

Acknowledgment of Risk in the Practicum

This document is to inform you of some of the potential risks associated with your placement. Your safety in the practicum is critically important to the College. With knowledge and preparation, specific risks can be minimized, enabling you to have a positive and productive practicum experience.

1. **Personal Safety.** You may encounter risks to your personal safety during the practicum. These risks may be physical and/or emotional and may arise when dealing with angry clients, making home visits, being exposed to clients who have infectious illnesses, and in other practicum-related situations. Personal safety training is provided by the practicum coordinator in seminar or orientation prior to the start of placement. Students are expected to discuss personal safety guidelines with their agency instructors very early in the placement so that they can be informed of any related agency training, policies, or procedures. Students are encouraged to discuss any concerns about physical or emotional safety with their agency instructors. If the concerns are unresolved, students are to discuss their safety concerns with their seminar liaison and/or coordinator. **Initial here** _____
2. **Practicing within your competence.** An important aspect of ethical, professional practice is knowing the limits of your knowledge and skills and not engaging in practice activities that are beyond your level of competence. Whenever you have a question or concern about how to handle a specific case and whether or not a specific intervention is appropriate, consult with your agency instructor before engaging in the intervention. **Initial here** _____
3. **Liability Insurance.** Students are required to carry and pay for the professional liability insurance that is managed by the UT Office of Risk Management. This insurance covers the liability of students for their actions while they are engaged in a University of Tennessee directed educational activity related to their professional field. This charge will be billed to students by the bursar's office prior to the start of practicum and will be paid by the student with tuition and fees. The policy term is annual, from June 1 to May 31 of each year that the student is in practicum. **Initial here** _____
4. **Use of Personal Vehicle.** If you will be using your personal vehicle to transport clients, it is essential that you check with your insurance company for a clear understanding of your coverage. Ask specifically what coverage you have if something happens while transporting a client. Check with your agency instructor to find out if the agency provides coverage for you if you use your vehicle to transport clients. Some agencies classify students as "volunteers" and this allows them to provide some coverage through policies for volunteers. Whenever possible, use an agency vehicle to transport clients. **Initial here** _____
5. **Immunization and Health Screening.** If you are placed in a setting in which there is the chance of being exposed to blood borne pathogens, it is recommended that you get the Hepatitis B immunization. This involves a series of three injections over six months. You can obtain this series at the student health clinic on the Knoxville campus or at your local health department. You may also be required or encouraged to complete specific immunization protocols and/or health screening by your practicum agency. It is important to discuss with your agency instructor any specific immunization or health screening requirements related to the placement before starting. **Initial here** _____

I have read the above and understand that participation in the practicum inevitably involves some risks. I also understand that using good judgment, exercising appropriate caution, and maintaining open communication with my agency instructor can help to minimize these risks. I further affirm that it is my responsibility to become informed of the specific risks that are inherent in my placement setting and to become informed of agency policies and procedures regarding these risks. **Initial here** _____

I hereby give permission to the Practicum Coordinator to release the information on this application to prospective agency Instructors. This information will be shared with prospective agency Instructors, as needed, for the purpose of facilitating my practicum placement. I understand that I have the authority to grant or deny permission for this release. I also understand that declining to grant this permission may exclude me from specific placements. I understand that this consent will remain in effect for as long as I am enrolled in the social work program, unless revoked by me in writing and delivered to the Practicum Coordinator. Such revocation shall not affect disclosures previously made in connection with this application by the Practicum Coordinator prior to any such written revocations.

Your signature below indicates you have provided accurate information on this application.

Student Signature

Date