

**NMSU SCHOOL OF SOCIAL WORK
BSW/ MSW - FIELD WORK APPLICATION FORM**

PLEASE SUBMIT A COPY OF YOUR RESUME ALONG WITH THIS APPLICATION.

Name _____ Date of application: _____

Student ID: 800 _____

I wish to enter the field at the following grade level:

BSW Student Senior Year:

MSW First Year Field Placement:

Full-time MSW 1st Year Student
(Entering Field First Time)

Part-time MSW Student (2nd year)
(Entering Field First Time)

MSW Second Year Field Placement:

Full-time MSW 2nd Year Student

Part-time MSW Student (3rd year)

Full-time MSW Advanced Standing

Part-time MSW Adv. Standing Student
(2nd year)

Are you receiving a CYFD stipend? _____ (yes) _____ (no)

Local Address: _____

(City)

(State)

(Zip)

Permanent Address: _____

(City)

(State)

(Zip)

Telephone

(____) _____
(Home)

(____) _____
(cell phone)

(____) _____
(work)

E-mail _____

MOST RECENT HUMAN SERVICE RELATED EXPERIENCE

Briefly describe the types of human service related assignments you've had. Please be sure to include types of problems, age groups, and types of systems with which you worked, as well as intervention methods used. (Include BSW field experiences if applicable and you may refer to your resume).

Agency Name: _____

Summary of your work: _____

Agency Supervisor/Instructor _____

Dates of work _____ Full time _____ Part time _____

Agency Name: _____

Summary of your work: _____

Agency Supervisor/Instructor _____

Dates of work _____ Full time _____ Part time _____

CIRCLE THE TYPES OF FIELD PROGRAMS YOU WOULD CONSIDER: The following are some areas of field work you might choose from:

- Children and family services
- Mental Health
- Medical
- Health
- Poverty advocacy
- Criminal Justice
- Schools
- Elderly
- Rehabilitation
- Public Welfare
- Military Services
- Substance abuse
- Residential treatment
- Other

WHAT TYPE OF FIELD EXPERIENCE WOULD YOU LIKE TO HAVE?

WHAT ARE YOUR LONG RANGE OCCUPATIONAL GOALS (FOR EMPLOYMENT):

LIST THREE AGENCIES YOU WOULD CONSIDER

Feel free to provide names and phone numbers of agencies you have a particular interest in. Please note that your choices are given serious consideration but your recommended field placement setting is determined by the Field Director in consultation with you.

1. _____
2. _____
3. _____

Make an appointment with the Field Coordinator or Associate Field Coordinator to discuss your placement. You will receive a letter authorizing you to contact one or more agencies for an interview to discuss your possible placement.

MEANS OF TRANSPORTATION:

You will be required to travel to your field site and in the surrounding area. Do you have a means of transportation? Yes _____ No _____

If no, how do you plan to meet these requirements? _____

OTHER INFORMATION REGARDING YOUR FIELD WORK PREFERENCES:

In what geographic area would you prefer your field work to be? (It may be necessary to travel up to 50 miles from your home)

- Las Cruces
- Albuquerque
- Other _____
- El Paso
- Alamogordo

ARE YOU BILINGUAL? Yes No

If your answer was yes, please list the language(s):

Do you have any special problems, limitations, and/or recommendations that need to be considered in community and/or host agency selection? Please explain.

Student's Signature

Date

DETERMINATIONS OF ELIGIBILITY TO NEW MEXICO SOCIAL WORK LICENSURE

Answering the following questions is required of all applicants for field placement and for determinations of eligibility to New Mexico Social Work Licensure following graduation. Omission of any information may result in our inability to process your application and provide a field placement for you. Provision of this information will not affect your standing in the social work program but it may limit the type of placement setting you will be assigned to. This information will not be shared with a field agency without your express permission. Many agencies have specific background and criminal record check procedures that you must agree to for placement in that agency.

FALSE STATEMENTS ON THIS FORM WOULD BE EVIDENCE OF UNETHICAL BEHAVIOR AND CONSEQUENTLY GROUNDS FOR TERMINATION FROM THE SCHOOL OF SOCIAL WORK.

1. Have you ever used another name under which records may be filed concerning your application, or your education, training, or experience leading to your application? **Yes** ___ **No** ___
2. Have you ever been charged with, or received a deferred prosecution or deferred judgment, or been convicted or pled guilty to or pled no contest to a felony or misdemeanor in any state, territory, or district of the United States, or foreign country? **Yes** ___ **No** ___ **(If yes, please attach a complete and comprehensive explanation)**
3. Have you ever pled guilty to or pled no contest to or been convicted of Driving Under the Influence or Driving While Intoxicated? **Yes** ___ **No** ___ **(If yes, please attach a complete and comprehensive explanation)**
4. Have you ever been charged with and found responsible for any type of abuse of a child? **Yes** ___ **No** ___ **(If yes, please attach a complete and comprehensive explanation)?**
5. Have you ever been denied a license or permission to practice Social Work or permission to take an examination to practice Social Work in any state, country, or territory? **Yes** ___ **No** ___ **(If yes, please attach a complete and comprehensive explanation)?**
6. Has any disciplinary action ever been taken regarding your practice or Social Work or any license you hold or have held to practice Social Work? Disciplinary actions include, but are not limited to, suspension, probation, practice limitations, reprimand, letter of admonition,

censure and any allegations currently pending? **Yes ___ No ___ (If yes, please attach a complete and comprehensive explanation).**

7. Have you ever voluntarily surrendered a license to practice Social Work in any other state or territory? **Yes ___ No ___ (If yes, please attach a complete and comprehensive explanation).**

Student Signature

Date