Memorial University of Newfoundland

School of Social Work

St. John’s, NL, Canada A1C 5S7

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(709) 864-8165 (t) (709) 864-2408 (f)

***Field Instructor / Agency Mentor Information Form***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Contact Information:** | | | | |
| Name |  | | | |
| Agency/Program |  | | | |
| Work Address/ Location |  | | | |
| Telephone Number(s) | Work |  | Cell |  |
| Email Address (work) |  | | | |
| Date Form Submitted |  | | | |

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| **Field Setting:** |
| Please briefly describe the field setting (i.e., population served, theoretical orientation, types of social work practice). |
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| --- | --- | --- | --- | --- | --- |
| **Relevant Employment Experience (or attach your resume or curriculum vitae):** | | | | | |
|  | Dates | Agency/Organization | | Position/Field of Practice | |
| 1. |  |  | |  | |
| 2. |  |  | |  | |
| 3. |  |  | |  | |
| 4. |  |  | |  | |
| 5. |  |  | |  | |
| **Educational Experience:** | | | | | |
| Degree | | | Educational Institution | | Year |
|  | | |  | |  |
|  | | |  | |  |
|  | | |  | |  |

**Are you a registered social worker?** Yes No

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Field Instructor Experience and Training:** | | | | |
| ✓ | (please choose all that apply) | | | |
|  | completed Memorial University on-line Field Instructor Course | | Year: |  |
|  | completed Memorial University on-site Field Instructor Course | | Year: |  |
|  | completed CASWE-ACFTS on-line Field Instructor Course | | Year: |  |
|  | completed other Field Instruction Courses | | Year: |  |
|  | provided field instruction to BSW students | | How many: |  |
|  | provided field instruction to MSW students | | How many: |  |
|  | read Memorial University BSW Field Education Manual | | | |
|  | read Memorial University MSW Field Education Manual | | | |
|  | Other, please specify: |  | | |

Memorial University protects your privacy and maintains the confidentiality of your personal information. The information requested in this form is collected under the general authority of the Memorial University Act (RSNL 1990 Chapter M-7). It is required for BSW/MSW field education administration, coordination, and planning. Questions about this collection and use of personal information may be directed to a Field Education Coordinator at (709) 864-8165.

**By completing and submitting this form, you consent to this collection of your personal information for the purposes outlined above.**

Please email the completed form to [scwkfield@mun.ca](mailto:scwkfield@mun.ca).

Please email the completed form to Sheri McConnell,

Field Education Coordinator, at [smcconne@mun.ca](mailto:smcconne@mun.ca).