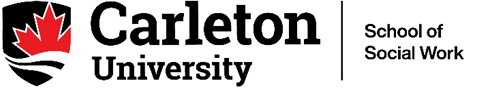
**Practicum Agreement Form  
Bachelor of Social Work**

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| *Students must register for practicum courses once permission is granted by the Practicum Administrator.*  *For information on course sequencing, see the* [*BSW Program Hub*](https://carleton.ca/socialwork/bsw-program/)*.*  *See the BSW Practicum Manual for application deadlines and important information on practicum courses. Available on the* [*BSW Practicum Hub*](https://carleton.ca/socialwork/bsw-practicum/) *under “Student Forms and Manuals.”* |

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| **PRACTICUM COURSE** | |
| **THIRD YEAR COURSES:** | **FOURTH YEAR COURSES:** |
| **SOWK 3600\***  *\*Part-time option taken over fall and winter terms.* | **SOWK 4600\***  *\*Full-time option taken over one term*  **Fall  Summer** |
| **SOWK 3601\***  *\*Full-time option taken over winter term. Reserved for newly admitted third-year entry students.* | **SOWK 4601/4602\***  *\*Part-time option taken over two consecutive terms*  **Fall-Winter  Winter-Summer**  **Summer-Fall** |

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| --- | --- |
| **STUDENT INFORMATION** | |
| **Name:** |  |
| **Student number:** |  |
| **Pronoun(s):** |  |
| **Carleton e-mail (cmail)** | @cmail.carleton.ca |

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| --- | --- |
| **AGENCY INFORMATION** | |
| **Name of Agency:** |  |
| **Address:** |  |
| **Field Supervisor:** |  |
| **Title/Role:** |  |
| **Education/Credentials:** | **BSW**  **MSW**  **Other *(please specify)*:** |
| **E-mail:** |  |
| **Phone number:** |  |
| **Fax:** |  |
| **Anticipated start date:** *(see* [*term dates*](https://calendar.carleton.ca/academicyear/)*)* |  |
| **Anticipated end date:** *(see* [*term dates*](https://calendar.carleton.ca/academicyear/)*)* |  |
| **ADDITIONAL FIELD SUPERVISOR**  *(If applicable. Add additional sections as needed)* | |
| **Field Supervisor 2:** |  |
| **Title/Role:** |  |
| **Education/Credentials:** | **BSW**  **MSW**  **Other *(please specify)*:** |
| **E-mail:** |  |
| **Phone number:** |  |

|  |  |
| --- | --- |
| **STUDENT SIGNATURE:** | **DATE:** |
|  |  |
| **FIELD SUPERVISOR SIGNATURE:** | **DATE:** |
|  |  |

**Submit to: Megan Stansel  
 Practicum Administrator  
 School of Social Work** [**SSW.Practicum.Admin@carleton.ca**](mailto:SSW.Practicum.Admin@carleton.ca)

*Document revised March 31, 2022.*