



Social Work All Programs Field Placement Acceptance Forms

This document is completed by **Field Instructors or Field Agency| Organization contact person** with the authority to approve students for The University of Akron School of Social Work field education experience.

Complete this document by typing directly into the gray buttons which will disappear and expand as you type. Click directly on the box and it will turn a darker gray letting you know you are in the box and begin typing.

Upon completion, please electronically send this document to the program/field contact person of the field student's program. Note: This is a three-page document. Please return all pages to minimize delay in assigning your students. Refer to our [website](#) for detailed contact information for all campuses. Please complete all electronic sections- ***no handwritten documents accepted.***

- ☐ **Akron campus** – All Undergraduate Learners | [Naomi White](#)
- ☐ **Akron campus** - Graduate, Foundation (1st placement) Learners | [Naomi White](#)
- ☐ **Akron campus** – Graduate, Concentration (2nd placement & Advanced Standing) Learners | [Becky Thomas](#)
- ☐ **Lakewood Campus** – All Learners – [Becky Thomas](#)
- ☐ **Wayne College Campus** – All Learners – [Lisa Crites](#)

LEARNER INFORMATION

Learner's Full Legal Name:

Learner's Email Address: @zips.uakron.edu

Semester Field Start: Choose an item. Year Field Start: Choose an item.

Program Status: Choose an item.

Program location: Choose an item.

Learner Status: Choose an item.

Field at Place of Employment (FAPE): Choose an item.

Click on Today's Date: Click here to enter a date.



Social Work All Programs Field Placement Acceptance Forms

FIELD INSTRUCTOR INFORMATION | SIGNATURE BOX

☐ A check in this box, affirms that I hereby attest that all of the information on this Acceptance Form is true to the best of my knowledge and is the equivalent of my signature.

Signature Date: [Click here to enter a date.](#)

Interviewer Information

Full name:

Date: [Click here to enter a date.](#)

Interviewer credentials: [Choose an item.](#)

E-mail address:

Organization Information

Organization Legal Name:

Organization Address:

Organization Phone #

Organization web-site:

Field Instructor name (if different than Interviewer's name):

Date: [Click here to enter a date.](#)

Field Instructor credentials: [Choose an item.](#)

E-mail address:

Organization Legal Name:

Organization Address:

Organization Phone #

Organization web-site:



Social Work All Programs Field Placement Acceptance Forms

Important- If your learner will be placed at different site/campus than organization's address listed above, please provide information below. Providing this information will assist the school when providing contact information to Field Faculty Liaisons to conduct mandatory semester site visits.

Satellite campus name:

Field Placement Site Address:

Field placement Site Phone number:

COMMENTS: While it is not necessary to explain why you have or have not accepted a student for a field practicum experience, please do not hesitate to bring any questions you may have to our attention:

"Our field team wishes to express our sincerest appreciation for your commitment to help educate our students. We understand and appreciate the time and effort that goes into guiding emerging social work professionals and sharing your practice wisdom, unique skill sets, and professionalism. On behalf of our students, we thank you for your dedication to the social work profession."

Lisa, Janice, Rob, Becky, & Naomi