Social Work Program Student Interview Pre-Internship Agency Profile Form
Please complete this form at the time of your internship and collect all required information in collaboration with your prospective field agency. Return this form to the Coordinator of Field Education no later than the 6th week of the semester preceding your internship.

<table>
<thead>
<tr>
<th>Student Name</th>
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<tbody>
<tr>
<td>Student E-mail Address</td>
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<tr>
<td>Agency Name</td>
</tr>
<tr>
<td>Agency Address</td>
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<tr>
<td>Agency Telephone</td>
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<tr>
<td>Contact Person</td>
</tr>
<tr>
<td>Telephone (if different than agency phone)</td>
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<tr>
<td>E-mail of Contact Person</td>
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<tr>
<td>Field or Task Supervisor, Title and Degree</td>
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</tbody>
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Please circle the answer that best describes your agency
1. My agency setting is:
   - Public
   - For Profit
   - Private Sectarian
   - Not for Profit
   - Non Sectarian

2. The service area covered by my agency is
   - County
   - City-Wide
   - Regional

3. The characteristics of client’s served at my agency are
   - African American
   - Asian
   - Caucasian
   - Hispanic
   - Other
   - Rural
   - Urban
   - Low income
   - Middle-income

4. The population served at my agency is
   - Under 2,500
   - 2,500-10,000
   - 10,000-50,000
   - 50,000-100,000
   - Over 100,000

5. The client population served at my agency is (circle all that apply)
   - Child Welfare
   - Family Services
   - School Social Work
   - Health/Medical
   - Mental Health
   - Corrections
   - Community Organization
   - Developmental Disabilities
   - Domestic Violence
   - Homelessness
   - Chemical Dependency
   - Aging
   - Women
   - Other: (Explain)

6. Please describe the staff composition (number of staff, number of BSW’s, number of MSW’s and
number of other degrees)

7. Will the student require an automobile?  Yes  No

8. Can your agency accommodate a student with a disability?  Yes  No

9. Will the student have opportunities to attend conferences/trainings?  Yes  No

10. Please describe what basic practice skills and knowledge the student must possess to successfully complete an internship at your agency.

11. What clearances or medical tests will be required for the student to complete an internship at your agency?

12. Do you have a current Affiliation Agreement with Bloomsburg University?  
   Yes  No  
   If No, will your agency have any conflicts signing an Affiliation Agreement?  
   If Yes, please explain

13. Does your agency provide liability coverage for student interns?  Yes  No  
   If Yes, please provide a letter from the agency signed by the field instructor and agency administrator stating coverage that will be provided.

14. Do you have a job description specifying the student job duties as a social work intern?  Yes  No

15. Will the student’s field supervisor have a social work degree from a CSWE accredited program?  Yes  No  
   If No, is there anyone in the agency or known to the agency with a social work degree from a CSWE accredited program that would be in agreement with providing at minimum 1 hour of weekly supervision to student during his or her internship?  If Yes, please explain.

** Please note that the student will need a brief intern/job description provided to the BU Internship Office to schedule their internship. This description should accompany this completed form. If more time is needed to complete a description, please email the completed form to the field coordinator at serdley@bloomu.edu as soon as possible.

Date completed and returned to Social Work Field Education Office ___________________