

THE UNIVERSITY OF OKLAHOMA SCHOOL OF SOCIAL WORK

TEACHING AND LEARNING AGREEMENT

Direct Practice

(Due no later than the 3rd week of the start of the practicum each semester)

Student: _____

Date Learning Agreement Completed: _____

Practicum Instructor

Name: _____

Agency: _____ Phone: _____

Address: _____

Preferred mailing address (if different from above):

Practicum Preceptor (if applicable)

Name: _____

Agency: _____ Phone: _____

Address: _____

Preferred mailing address (if different from above):

FIELD PLACEMENT INFORMATION

Placement Dates

Beginning Date: _____ Ending Date: _____

Scheduled Student/Agency Vacations: Dates (include days and hours for clarity):

PRACTICUM INSTRUCTION OBJECTIVES

The following areas are included in the objectives for field placement and in the evaluation to be completed for each student. Please discuss this with your practicum student and identify the assignments which will be used to build and assess mastery in each of these areas. You may want to refer to the Practicum Outcomes on the corresponding course syllabus and to the student evaluation for the course to help with your plans. Both are on the web page. All syllabi are in the Manual Appendix and the evaluation forms are on the Student Forms page.

Please write the specific activities/learning experiences available in your setting for each of the following objectives. Use additional paper if you need more space or wish to type the agreement.

I. ETHICS AND VALUES

A. Knowledge and use of social work values and ethics

Activities/Learning Experiences:

B. Develop and maintain professional relationships with diverse clientele

Activities/Learning Experiences:

II. KNOWLEDGE

- A. Understanding of social work knowledge base including a systemic strengths perspective**

Activities/Learning Experiences:

- B. Knowledge of agency mission, and knowledge and use of agency policies and procedures**

Activities/Learning Experiences:

- C. Understanding of cultural competence in social work practice**

Activities/Learning Experiences:

D. Knowledge and use of community resources

Activities/Learning Experiences:

III. SKILL DEVELOPMENT

A. Establishing and maintaining effective helping relationships with a variety of client systems

Activities/Learning Experiences:

B. Development and understanding of the concentration skills based on a foundation of generalist practice.

Activities/Learning Experiences:

C. Development of clear and/effective communication skills, both in oral and written communication

Activities/Learning Experiences:

D. Acquiring skills to implement social work

Activities/Learning Experiences:

E. Effectiveness in managing field work responsibilities

Activities/Learning Experiences:

IV. PROFESSIONAL SELF AND RELATIONSHIPS

A. Understanding the use of supervision in social work practice

Activities/Learning Experiences:

**B. Development of skills necessary to work appropriately with social work
and multidisciplinary colleagues**

Activities/Learning Experiences:

C. Development of a professional self

Activities/Learning Experiences:

Types of Assignments (check all that apply):

Note: Direct services are those services that the student will provide directly to the population or systems indicated. Indirect services may include services provided on behalf of the population client systems indicated and/ or other learning experiences that are observational (e.g. “shadowing”).

Work with:	Direct Service	Indirect Service
Individuals	<input type="checkbox"/>	<input type="checkbox"/>
Families	<input type="checkbox"/>	<input type="checkbox"/>
Groups	<input type="checkbox"/>	<input type="checkbox"/>
People of Color	<input type="checkbox"/>	<input type="checkbox"/>
Gays and Lesbians	<input type="checkbox"/>	<input type="checkbox"/>
Special Populations	<input type="checkbox"/>	<input type="checkbox"/>
Community Organizations	<input type="checkbox"/>	<input type="checkbox"/>
Other, please specify	<input type="checkbox"/>	<input type="checkbox"/>

FIELD INSTRUCTION/SUPERVISION

Scheduled instruction/supervision provided by Practicum Instructor
(At least one hour of supervision per week)

Name: _____ Title/Position: _____

Scheduled conference time and number of hours scheduled per week: _____

Supervisory Methods to be Used:

(e.g., Individual, Group, Process/Summary Recording, Audio Tapes, Video Tapes, Team Meetings, Consultation, etc.)

Additional Training and/or Learning Opportunities Available for the Student:

(e.g., Workshops, In-service)

Practicum Instruction Evaluation:

Evaluation conferences with the student are to be conducted by the practicum instructor with input from other professionals involved in supervising the student (where applicable). These should take place at mid-term and at the conclusion of the practicum. Due dates are listed in the Practicum Calendar.

Student	Date
---------	------

Practicum Instructor	Date
----------------------	------

Practicum Preceptor (if applicable)	Date
-------------------------------------	------

Faculty Liaison	Date
-----------------	------