



BSW STUDENT INFORMATION FORM

DISTANCE

Name of Student: _____ Student Number: _____

Dalhousie Email Address: _____

Current Address: _____

_____ Postal Code: _____

Telephone Numbers: (H) _____ (W) _____ (C) _____

Summer Residence #: _____

Do you have access to a vehicle? Yes No

Are you currently employed? Yes No Full-time Part-time

Can you be called at work? Yes No

Will you be working during your placement? Yes No Full-time Part-time

If working fulltime during placement, how do you propose to complete the required hours?

Please check when you plan to do your Field placement:

January to August (part-time) April to August (full-time block)

What areas of social work or social issues are you interested in?

1. _____

2. _____

3. _____

4. _____

Prospective Placement Agencies in Order of Priority (If an Agency has agreed to offer you a placement include only that one Agency):

1. Name of Agency: _____

Complete Mailing Address: _____

Contact Person: _____ Email Address: _____

Phone: _____ Fax: _____

2. Name of Agency: _____

Complete Mailing Address: _____

Contact Person: _____ Email Address: _____

Phone: _____ Fax: _____

3. Name of Agency: _____

Complete Mailing Address: _____

Contact Person: _____ Email Address: _____

Phone: _____ Fax: _____

4. Name of Agency: _____

Complete Mailing Address: _____

Contact Person: _____ Email Address: _____

Phone: _____ Fax: _____

(DIS)ABILITY SUPPORT FOR FIELDWORK

There is support for students who need accommodations for fieldwork due to a (dis)Ability. If you have a (dis)Ability and might require accommodations within fieldwork please register at the Mark A. Hill Access and Advising Centre located in the Killam Library Building (see link below). The School's Accommodation Officer/Associate Director is also available to discuss your accommodation needs particularly if those needs extend beyond the services of the Mark A. Hill Centre. It is advisable to register even if you are not certain you will need accommodations so we are prepared to support you if needed.

http://www.dal.ca/campus_life/academic-support/accessibility.html

Student Signature

Date

Please check this box to indicate electronic signature:

Please return form to:
Field Education Assistant
sswfield@dal.ca

Note: Completion of this form is required as part of the **Student Submission Package**.