SWP 51A/B Field Practicum Learning Plan

# PURPOSE

The purpose of developing a learning plan for the placement is to identify the major learning goals the student needs to accomplish during the placement experience. These learning goals should come from an understanding of self, and the skills, values, and knowledge developed to the present time. Therefore, learning goals can be made for the further expansion of skills (e.g., assessment); values (e.g., awareness of value conflicts); and knowledge (e.g., concepts that can be readily applied to various practice problems). The learning plan is a placement exercise, in that it is to be negotiated between the student and the Field Instructor in consultation with the Faculty Consultant. It is a mutual task and should be agreed upon when both parties in the process have shared their pertinent thinking about what must be included in the plan.

# Instructions

1. Student completes the learning plan in consultation with the Field Instructor.
2. Field Instructor and the student electronically sign the completed learning plan.
3. Field Instructor submits the completed and signed learning plan to the Faculty Consultant.\*
4. Faculty Consultant reviews the learning plan and provides feedback to the student as necessary.
5. Faculty Consultant electronically signs the learning plan.

\* If the student submits the form to relieve the administrative burden from the Field instructor, then the Field instructor must be copied in the email submission.

NOTE: Learning plans are to be based on the School of Social Work’s practicum curriculum. Each individual student’s learning plan will differ slightly according to the particular nature of the placement setting as well as the specific learning opportunities available in that setting.

**Student Name**:

**Placement Organization Name**:

**Field Instructor Name**:

# Learning Plan Goals and Objectives

1. **List the student’s learning outcomes to date based on previous field placements and work/volunteer experience.**

1. **What is the function of social work within this placement setting and what are the practice activities that the student will be involved in?**

1. **What knowledge base does the student want to improve on during this placement (e.g., social policies, forms of oppression, advocacy)?**

1. **What social work practices/skills does the student want to improve on during this placement (e.g., assessment, planning, counselling, group work, research)?**

1. **What are the learning areas/opportunities for the student in this placement setting?**

1. **How will remote-based practice impact the placement learning opportunities?**

1. **How will the student be involved in social justice and anti-oppression social work in this placement setting?**

1. **What resources will the placement setting provide to assist the student in achieving the above (e.g., reading materials, Field Instructor supervision, workshops, team meetings, other colleagues)?**

1. **What are some of the ethical considerations within this placement (e.g., confidentiality, boundaries, release of information, duty to report)?**

1. **Will the student be involved in conducting research during the placement? If yes, please list the research tasks that the student will undertake?**

1. **What method has the Field Instructor and student agreed upon to use for keeping track of field placement hours worked? Please note that we recommend that the school’s timesheet, available online at the school’s website, be used to track hours worked.**

1. **What has the Field Instructor and student agreed upon for structured field instruction/supervision? Please provide details (i.e., how often, when, where, what are students expected to bring to supervision, etc.). Please note the minimum expectation is for one hour per week of supervision.**

# Electronic Signatures

[ ]  By checking this box and typing my name, I understand that I am electronically signing this evaluation form.

**Field Instructor Print Name:**

**Date:**

[ ]  By checking this box and typing my name, I understand that I am electronically signing this evaluation form.

**Student Print Name:**

**Date:**

[ ]  By checking this box and typing my name, I understand that I am electronically signing this evaluation form.

**Faculty Consultant Print Name:**

**Date:**

# For Internal Office Use Only

| To be completed by the Faculty Consultant upon receipt of the completed learning plan |
| --- |
| [ ]  The Field Instructor listed in the *Signatures* section of this form is the **same individual** listed on the placement roster  |
| [ ]  The Field Instructor listed in the *Signatures* section of this form is **someone different** than the individual listed on the placement roster\* |
| [ ]  I am not sure\* |

\*Please notify the Field Education Program Administrator of change in field instruction.