School of Social Work University of Nevada, Las Vegas

Field Practicum Petition Form

Petition Request: Requesting to conduct field practicum at place of employment.

Program		Semester	Year
Last Name	First Name	NSHE #	
Address		State	Zip Code
Phone Number		UNLV Email Address	

Justification: Provide a detailed description of your work responsibilities and your anticipated practicum tasks and practice behaviors, and how they will differ. There must be clear boundaries between your work and practicum activities.

Other: Provide any additional information to support your request here.

Justification: For place of employment, practicum tasks/practice behaviors, Agency Field Instructor and schedule are different from work description, work supervisor and work schedule (see page 2).

DIRECTIONS: Please fill out the following information. If more space is needed, please use a separate document Note: If you need additional space, please attach a separate document

Agency	Name
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Agency Street Address	State	Zip
Telephone Number	AFI Name	
Practicum Schedule: **Include days and hours Practicum Tasks:		
	owing information if completing practic Note: Schedule must be different from you	ur job
If Work Schedule: **Include days and hours	you need additional space, please attacl document	1 a separate
Work Tasks:		
		Petitions must include signatures from the students, AFI, and Work Supervisor
Work Supervisor Signature	Date	
	understand the following statement: notify the UNLV School of Social Wor	
I hereby authorize the Registrars O	ffice to release my academic records to	the Field Education Department.
Student Signature	Date AF	I Signature Date
For Field Education Department Approve Disapproved	Use Only	
Comments:		

Practicum I / Work Activities	New Practicum Activities		