COLUMBIA UNIVERSITY SCHOOL OF SOCIAL WORK FIELD INSTRUCTOR'S EXPERIENCE OUTLINE

Please complete this form if you are taking the Seminar in Field Instruction (SIFI) or confirming that you have already completed a SIFI course.

DATE:	LMSW? SYES NO	LCSW? 🗌 YES 🗌 NO
NAME:		
POSITION:		
AGENCY		
AGENCY TELEPHONE NO	D.:	
The policy of the School req supervision do not meet the S	· · · · · · · · · · · · · · · · · · ·	e-session Seminar in Field Instruction. Courses in
I have \Box have not \Box taken	n a Seminar in Field Instruction.	
	mpleted a recent Seminar in Field Instruction ent. Please complete the following informat	on at a Graduate School of Social Work, this may tion:
SCHOOL OF SOCIAL WO	RK WHICH SPONSORED SEMINAR:	
INSTRUCTOR:		ACADEMIC YEAR:
If you have a copy of your co	ertificate of satisfactory completion of the S	Seminar, attach it to this form.
If you have not completed a following information:	Seminar in Field Instruction at a Graduate	School of Social Work please indicate the
☐ I will be supervising an A on Thursdays from 9:00 .		omatically be placed in the AGP&P SIFI that meets
	licy or Social Enterprise Administration stu SIFI that meets on Fridays from 9:00AM	ident in <u>September</u> . You will automatically be -11:00AM .
	-	<u>nber</u> . Specify all the days you are available to take e scheduled for a Seminar on one of these days.
□ 9-11AM Tue. □ 2	2-4PM Tue. □ 9-11AM Wed. □ 4-6PM Tue.	 □ 2-4PM Wed. □ 9-11AM Thur. □ 9-11AM Fri.

Attach a resume and a copy of your SIFI certificate (if you have one) and return to **Ovita Williams** to the address below or fax (212-851-2330). *Please note that a confirmation email will not be sent until late August*.