



**SCHOOL OF
INDIGENOUS RELATIONS**
NISHNAABE KINOOMAADWIN
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Learning Contract Information for ISWK 3605 and or ISWK 4605

Tick Relevant Course No.: ISWK 3605 ____ ISWK 4605 ____

Student Name: _____

Field Instructor: _____

Faculty Consultant: _____

Field Access Supervisor: _____

Field Education Setting: _____

Goal: What do you hope to achieve by completing your placement in this setting/context?

Purpose: Explain why you have chosen this particular agency/setting/context to do your placement within? Student Profile page 2 question 4 will help you with this part.

Objective 1: To complete course requirements

Activities: Coordinate field meetings, submit journals on time, submit final assignment at the completion of placement.

Objective 2: To adhere to social work code of ethics, and policies and procedures of the agency.

Activities: Sign Declaration Agreement of Understanding form, read agency policy and procedure manual(s) and apply, adhere to the Professional Code of Ethics, CASW, OCSWSSW, and Sacred Teachings as outlined in the Field Placement Manual

Objective 3: Incorporate Learning Objectives from your Student Profile as well as from your Job Description (position you are learning in your field placement)

Activities: List the activities/tasks you will be doing to achieve this objective.

Objective 4: Add as many objectives you need to cover about what you will be learning in this field placement according to your Student Profile and Job Description. Your Field Instructor will be able to provide your (his/her) job description.

Activities: List the activities/tasks you will be doing to achieve this objective.

Objective 5: Same as 3 & 4 (you can put as many objectives as you need)

Activities: As above

SUPERVISION PATTERNS AND TIMES

Describe how you will engage in supervision

TERMS OF PLACEMENT

Progress (measures of accomplishments) to ensure achievement of my learning objectives

Field Instruction is graded on a Satisfactory / Fail basis.

MIDTERM EVALUATION

Date:

Time:

FINAL EVALUATION

Date:

Time:

WORK SCHEDULE

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

FIELD TOTAL: ISWK 3605 300 HOURS MIN. _____ OR ISWK 4605 400 HOURS MIN _____

BEGINNING DATE:

COMPLETION DATE:

This Field Learning Contract is subject to change after consultation with the Field Instructor and the Faculty Consultant.

I have read and understood all Policies and Procedures relevant to Field Education (see pgs 21-63) and have completed/signed all required Forms, and understand the requirements for the relevant Course Outlines (ISWK 3604/4605).

SIGNATURES

Student _____ Date _____

Field Instructor _____ Date _____

Field Consultant _____ Date _____