<table>
<thead>
<tr>
<th>Field Site</th>
<th>Site Address</th>
<th>Zip</th>
<th>Phone</th>
<th>Cell/Pager</th>
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</tbody>
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Field Supervisor:  
- Name:  
- Phone:  
- Ext.:  
- E-mail:  
- Cell/Pager:  

Task Instructor (if needed):  
- Name:  
- Phone:  
- E-mail:  
- Cell/Pager:  

ASU Faculty Liaison:  
- Name:  
- Phone:  
- Ext.:  

- MSW Full Time Advanced I  
- MSW Full Time Advanced II  
- MSW Part Time Advanced I  
- MSW Part Time Advanced II  
- MSW Part Time Advanced III  
- MSW Part Time Advanced IV

Academic Year ____________________

1. The student will complete the Learning Agreement with the assistance of the Field Supervisor. Learning activities will provide the opportunity for students to demonstrate the practice behaviors. The student should write a rough draft and present the draft for discussion to the Field Supervisor. The contents of the final document must be agreed to by all involved parties. Students must demonstrate the completion of all competencies and practice behaviors by the end of the second semester.

2. The Learning Agreement serves as a guide to assess academic and professional performance throughout the semester. It is a tool for an informal mid-semester assessment during the site visit with the Faculty Liaison to assess the progress of student competency attainment. If needed, mid-year adjustments or additional activities can be added to the plan with the date indicating it is an amendment.

3. At the end of the semester, this form will be used to assess overall student performance. The Field Supervisor will need to evaluate each practice behavior with the rating scale and complete the evaluation of professional work skills. All involved parties must sign this document that will be retained for the student's file. The fall assessment should serve as a planning tool for the spring semester.

4. All learning activities include a box for a rating at the end of the semester. The ratings will be as followed: (1) consistently fails to meet expectations, (2) occasionally meets expectations, (3) meets expectations, (4) occasionally exceeds expectations, and (5) consistently exceeds expectations.

5. The final assessment completed at the end of the second semester should reflect assessment of the entire year and evaluate all competencies/practice behaviors.
In this section of the Learning Agreement, students should identify the tasks and/or activities that will enable them to demonstrate the practice behaviors relative to the specific competencies. **Note:** Not all the items need to be addressed the first semester; however, all must be addressed before the completion of the second semester. The final assessment at the conclusion of the spring semester, must provide a comprehensive assessment/rating for all competencies/practice behaviors.

<table>
<thead>
<tr>
<th>Rating Scale</th>
<th>1 – Consistently fails to meet expectations</th>
<th>2 – Occasionally meets expectations</th>
<th>3 – Meets Expectations</th>
<th>4 – Occasionally exceeds expectations</th>
<th>5 – Consistently exceeds expectations</th>
<th>6 – N/A</th>
</tr>
</thead>
</table>

1. **Identify as a professional social worker and conduct oneself accordingly.**

<table>
<thead>
<tr>
<th>Demonstrate appropriate professional use of self within the therapeutic relationships</th>
<th>Final Outcomes/Evaluation</th>
<th>Learning activity</th>
<th>Rating</th>
</tr>
</thead>
</table>

2. **Apply social work ethical principles to guide professional practice.**

<table>
<thead>
<tr>
<th>Recognize and resolve ethical issues common to clinical social work practice in rural environments</th>
<th>Final Outcomes/Evaluation</th>
<th>Learning Activity</th>
<th>Rating</th>
</tr>
</thead>
</table>

3. **Apply critical thinking to inform and communicate professional judgments.**

<table>
<thead>
<tr>
<th>Engage in reflective practice that includes the recognition of how previous personal experiences including those with trauma may potentially affect therapeutic work with clients</th>
<th>Final Outcomes/Evaluation</th>
<th>Learning Activity</th>
<th>Rating</th>
</tr>
</thead>
</table>

4. **Engage diversity and difference in practice.**

<table>
<thead>
<tr>
<th>Differentially adapt and apply clinical practice skills to respond to the characteristic of client systems from rural environments</th>
<th>Final Outcomes/Evaluation</th>
<th>Learning Activity</th>
<th>Rating</th>
</tr>
</thead>
</table>

5. **Advance human rights and social and economic justice.**

<table>
<thead>
<tr>
<th>Use knowledge of the historical effects of oppression, discrimination, and historical trauma on clients and client systems, particularly those from rural communities to guide assessments, treatment planning and interventions</th>
<th>Final Outcomes/Evaluation</th>
<th>Learning Activity</th>
<th>Rating</th>
</tr>
</thead>
</table>
6. Engage in research-informed practice and practice-informed research

| Critically evaluate research to determine its generalizability and relevance for working with diverse populations and client systems in rural environments | Final Outcomes/Evaluation - to be completed at conclusion of semester |
| Learning Activity | |
| Rating |

7. Apply knowledge of human behavior and the social environment

| Synthesize bio-psycho-social-spiritual theories and multi-axial diagnostic classification systems in the formulation of comprehensive assessments | Final Outcomes/Evaluation - to be completed at conclusion of semester |
| Learning Activity | |
| Rating |

8. Engage in policy practice to advance social and economic well-being and to deliver effective social work services

| Design intervention strategies that engage constituents from rural environments to advocate for policies that promote social justice, reduce disparities and promote quality of life and well-being | Final Outcomes/Evaluation - to be completed at conclusion of semester |
| Learning Activity | |
| Rating |

9. Respond to contexts that shape practice

| Analyze the effects of conditions of rural communities on human development, social functioning, and health status | Final Outcomes/Evaluation - to be completed at conclusion of semester |
| Learning Activity | |
| Rating |

10. Engage, assess, intervene, and evaluate with individuals, families, groups, organizations, and communities

10a. Engagement

| Demonstrate the capacity to engage and build relationships clients, including those who have experienced traumatized | Final Outcomes/Evaluation - to be completed at conclusion of semester |
| Learning Activity | |
| Rating |

10b. Assessment

<p>| Analyze characteristics of rural communities including strengths, assets, resources, barriers and limitations | Final Outcomes/Evaluation - to be completed at conclusion of semester |
| Learning Activity | |
| Rating |</p>
<table>
<thead>
<tr>
<th>Learning Activity</th>
<th>Final Outcomes/Evaluation</th>
<th>Rating</th>
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<tbody>
<tr>
<td>Assess the impact of loss and trauma on clients and client system’s physical,</td>
<td>- to be completed at conclusion of semester</td>
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<td>social and emotional well-being</td>
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<td>10c. Intervention</td>
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<tr>
<td>Use appropriate clinical techniques including cognitive behavioral therapy and</td>
<td>Final Outcomes/Evaluation</td>
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<td>crisis intervention to respond to concerns identified through on-going assessment</td>
<td>- to be completed at conclusion of semester</td>
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<tr>
<td>Learning Activity</td>
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<tr>
<td>Develop intervention strategies focused on traumatized individuals, groups and</td>
<td>Final Outcomes/Evaluation</td>
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<td>families</td>
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<td>10d. Evaluation</td>
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<tr>
<td>Implement practice evaluation strategies to assess the effectiveness of clinical</td>
<td>Final Outcomes/Evaluation</td>
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<td>practice</td>
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<tr>
<td>Learning Activity</td>
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Learning Agreement Signatures:

My signature below indicates that I agree that the above-mentioned tasks/activities are achievable this semester. I have participated in the formation of this document and will fulfill my role to complete the activities planned.

<table>
<thead>
<tr>
<th>Signature of Field Supervisor</th>
<th>Date</th>
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<tbody>
<tr>
<td>Signature of Task Instructor (If Applicable)</td>
<td>Date</td>
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<tr>
<td>Signature of Student</td>
<td>Date</td>
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<tr>
<td>Signature of Faculty Liaison</td>
<td>Date</td>
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Site Visit Summary Comments

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Signature of Field Supervisor  Date

___________________________________________  ________________  ______________________________
Signature of Task Instructor (If Applicable)  Date

___________________________________________  ________________  ______________________________
Signature of Student  Date

___________________________________________  ________________  ______________________________
Signature of Faculty Liaison  Date
Evaluation of Student Basic Work Skills and Attributes

To the Field Supervisor – After completing the rating scale above relative to each Learning Activity, please use the following scale to rate your student’s basic work skills and attributes

<table>
<thead>
<tr>
<th>Rating Scale</th>
<th>1 – Consistently fails to meet expectations</th>
<th>2 – Occasionally meets expectations</th>
<th>3 – Meets Expectations</th>
<th>4 – Occasionally exceeds expectations</th>
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</table>
Field Instructor recommendation of final letter grade _____

Final Evaluation Signatures:
My signature below indicates that I have either completed the evaluation or have reviewed the evaluation.

<table>
<thead>
<tr>
<th>FIELD SUPERVISOR RESPONSE TO EVALUATION</th>
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<tbody>
<tr>
<td>Field Supervisor’s Comments (Optional)</td>
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__________________________________________  _______________________
Signature of Field Supervisor                Date

<table>
<thead>
<tr>
<th>Signature of Task Instructor (If applicable)</th>
<th>Date</th>
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</thead>
</table>
STUDENT RESPONSE TO EVALUATION

_____ I agree       _____ I agree with reservation       _____ I disagree

Students Comments (Optional)

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

____________________________________  _______________________________
Signature of Student                   Date

__________________________________  _______________________
Signature of Faculty Liaison           Date