

## FIELD EXPERIENCE APPLICATION

Please email completed form and resume to Michael Pelts at peltsmd@plu.edu

Student Name \_\_\_\_\_

Campus Address \_\_\_\_\_ Telephone \_\_\_\_\_

Summer Address \_\_\_\_\_ Summer Telephone \_\_\_\_\_

PLU e-mail address: \_\_\_\_\_ Summer e-mail address \_\_\_\_\_

Anticipated Graduation Date \_\_\_\_\_ Academic term applied for: Fall/Spring \_\_\_\_\_

### **You must attach a complete resume to this application.**

Identify the skills you hope to learn in your Field Placement:

Languages spoken:

Preferred agency or population (List top three):

- 1.
- 2.
- 3.

Any additional considerations in selection of field experience (such as work-study eligibility, flexibility in scheduling hours, geographic location, special needs, etc.)

Overall GPA: \_\_\_\_\_ SOCW GPA: \_\_\_\_\_ Completed audio taped interview: \_\_\_\_\_

Assigned Agency \_\_\_\_\_ Supervisor \_\_\_\_\_

~~For Office~~ **FOR OFFICE USE ONLY:** \_\_\_\_\_ e-mail Address \_\_\_\_\_

Qualifications: MSW \_\_\_\_\_ BSW \_\_\_\_\_