

**College of Staten Island  
City University of New York  
BSSW Degree Program  
Field Agency Application**

Agency Name: \_\_\_\_\_  
Agency Address: \_\_\_\_\_  
Agency Phone: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Contact Email: \_\_\_\_\_

| Field Instructor(s) | Date/Place MSW Awarded | NYS Licensure |
|---------------------|------------------------|---------------|
| _____               |                        |               |
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Do you have your SIFI? \_\_\_\_\_. If so, what institution and when did you receive it? \_\_\_\_\_  
If not, are you willing to obtain your SIFI through the CSI – NYU program? \_\_\_\_\_

Has your agency supervised BSW students previously? \_\_\_\_\_, if so, what educational institutions are you affiliated with? \_\_\_\_\_

Has your agency supervised MSW students previously? \_\_\_\_\_  
If so, what educational institution are you affiliated with? \_\_\_\_\_

What are the agency days and hours of operation? \_\_\_\_\_  
Are weekend/evening hours available? \_\_\_\_\_

Does the agency serve person's whose primary language is other than English? \_\_\_\_\_. If so what language(s) \_\_\_\_\_

**What population(s) does your agency service?**

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**What type of learning experiences/projects do you have available for interns?**

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**Are you available for weekly supervision with your intern?**

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**Does your agency have in-house or off-site trainings available? \_\_\_\_\_**

**What trainings have been offered in the past?**

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**Please check all that apply:**

**Are their opportunities at this agency for students to:**

- a- work with family's**
- b. work with individuals**
- c. work with groups**
- d. community organization**
- e. program development**
- f. policy formation**
- g. research**

**Please attach a current resume for all field instructors.**

**Return all documents to:**

**Kari Meyer, LMSW  
Director of BSSW Field Education  
College of Staten Island  
Department of Social Work**

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