

VOLUNTEER ACTIVITY AGREEMENT

To be filled out for students enrolled in **SWO 421 Social Work Methods II** before the student begins the actual volunteer hours. To assure that the placement agency will offer opportunities for the assignments to be completed, the course instructor must approve the placement agency and the supervisor before the student begins accumulating volunteer hours.

**Delta State University
Department Of Social Work
SWO 421 Social Work Methods II
Agency Volunteer Agreement**

Name of Student _____

I agree to supervise the above named student for 21 hours of social work volunteer experience in the agency where I work, as partial fulfillment of the requirements for the Delta State University course SWO 421 Social Work Methods II. I understand that the student is to submit 7 weekly assignments based on their experience in this agency, and I am willing to provide opportunities for the student to complete those assignments or to arrange for another staff member to work with them for particular assignments. A copy of those assignments is attached to this agreement. Also attached is an evaluation form, which I agree to complete on the student at the end of their 21 hours of volunteer work in this agency. The assigned work is to be done between

_____ and _____
(Date) (Date)

(Printed or typed name and title of Student's Supervisor)

(Signature of Student's Supervisor) (Date)

(Agency Name)

(Street or Post Office Address)

(Town, State, and Zip)

(Telephone and E-mail)

Student's Agreement

I have been taught by the faculty of Delta State University Department of Social Work about the *National Association of Social Workers Code of Ethics* and I agree to follow that code, as well as any other rules of confidentiality required by the agency where I am volunteering.

(Signature of Student) (Date)

(Signature of Course Instructor) (Date)

EVALUATION OF VOLUNTEER EXPERIENCE (SWO 320/421)

This form is to be completed by the agency field supervisor after the student has completed the 21 hours of volunteer experience of SWO 320 Social Work Methods I or SWO 421 Social Work Methods II.

Delta State University
Department of Social Work
Evaluation of Volunteer Experience
SWO 320 _____ SWO 421 _____

Student _____

Agency _____

I. Number of hours student volunteered in this agency: _____

II. Activities: Briefly describe the types of experiences the student had during the time spent in your agency.

III. Evaluation of Student: Comment on the student's performance, work habits, attitude towards clients, staff and instructor, and ability to successfully accomplish assigned tasks.

IV. Student Potential: Do you think this student has potential for a professional career in social work?

V. Level of Involvement: Overall, the student's performance was:

_____ Appropriate

_____ Inappropriate

Supervisor's Signature _____ Date _____

Supervisor's Name and Title Printed _____

Student's Signature _____ Date _____