

DISRUPTION NOTIFICATION

This form must be completed if an issues arises with a student's internship. A copy should be filed in the student's field portfolio

Student:		□BSW/MSW1 □MSW2/AS
Agency:	Inte	ernship start date:
Field Instructor:	Faculty Liaison:	
Reason for disruption: (check all that Agency capacity issues Learning experience inadequa Unanticipated changes at ager Schedule conflict	Unsatisfactory st te Student crisis	tudent performance rersity support
Describe Issues:		
Describe steps taken to resolve issues: Student Signature:		Date:
Field Instructor Signature: Faculty Liaison Signature:		
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□ Field Instructor □	ASP required Remediation Plan Req. Not eligible for new	 New Student requested Placement inactive New Field Instr. Req Date:

Return completed form to: Department of Social Work Field Education Program Nethery Hall – 009 Berrien Springs, MI 49104 Email: sowkfield@andrews.edu Fax: (269) 471-3686