**PLACEMENT CONTINUATION PROPOSAL**

**Date:**

**To:** WMU School of Social Work Coordinator of Field Education

**From:**

**Re:** Placement Continuation Proposal for MSW IP Concentration

**Agency: Address: Phone:**

**Tasks/roles/functions/responsibilities of the previous field placement:**

**Field Instructor:**

**Proposed Continuation Field Placement: Tasks/roles/functions/responsibilities of the proposed field placement:**

**Proposed Field Instructor:**

Student Signature Date

Previous Field Instructor Signature Date

Proposed Field Instructor Signature Date

WMU School of Social Work Field Coordinator Signature Date