

**Student Report for Site Visit**

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

Student Level:  BSW  MSW Generalist  MSW Specialist

Semester/Year:  Fall  Spring  Summer 20\_\_

Agency Name: \_\_\_\_\_

Field Instructor Name: \_\_\_\_\_

Target Population Worked With	Check All That Apply and Include Percent of Total Contacts
Children/Adolescents	
Adults	
Elderly	

Level of Service	Type of Service	Number of Cases/Times Completed		
		Observe	Co-facilitate	Facilitate
Micro	Case Mgmt			
	Supportive Counseling			
	Individual Counseling			
Mezzo - Family	Supportive Counseling/Counseling			
Mezzo - Group	Psychoeducational			
	Process			
	Support			
Macro	Community Meetings			
	Research			
	Agency Administration			
	Outreach			
	Other			
Documentation	Intakes/Assessments			
	Case Plan/Treatment Plan			
	Case/Group Notes			