

## School of Social Work

### Task Supervisor's Information Sheet

Date:  
Name & Title:  
Email:  
Agency:  
Mailing Address:

Physical Address:  
Telephone: Fax:  
Work Cell Number:

Academic degrees completed from

*\*Please include BSW, MSW, Psychology, Sociology, English, ect. in Degree Conferred column*

Name of School:	Date Attended:	*Degree Conferred:	Accredited:
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Number of years of professional employment post degree:

Number of years at agency:

Areas of Specialty:

The Radford University School of Social Work will approve all field agency sites and instructors/supervisors. By printing your full name below, you agree to adhere to the procedures set out by the Radford University School of Social Work.

**Printed Full Name**

*You agree to adhere to the procedures set out by the Radford University School of Social Work.*

Please ***attach resume*** & return to:  
**Radford University**  
**School of Social Work, PO Box 6958**  
**Radford VA 24142**