## Virginia Wesleyan University Bachelor of Social Work (BSW) Program Internship Application

Name:		
Home Address:		
Phone:	Email:	
Summer Address if Different:		
		-
Phone: ()	Email:	
CAMPUS ADDRESS (if applicable f	for Fall):	
Ideas I am considering for a Practicur	m Experience as required for SW 401:	
Age groups with whom I would like t	to work (1 <sup>st</sup> , 2 <sup>nd</sup> , 3 <sup>rd</sup> choice) for my Internship	Experience:
Types of agencies in which I would li	ike to work for as an intern:	
what are they? You must provide you departmental policy. You must be ava	ges that you may face of which the faculty shour our own transportation to and from the internship ailable to work in the agency 32 hours a week pus in Seminar class 4 hours per week one afte	p, per during