

AGENDA FOR WEEKLY SUPERVISION WITH AGENCY FIELD INSTRUCTOR

University of Montana
School of Social Work

updated 6/16

Student Name: _____ Date: _____

Areas of discussion:

Decisions and plans made:

Identification of learning (i.e. new concepts, increased understanding, frameworks, theories, critical thinking employed):

Review Learning Agreement:

Goals and objectives for next week:

Student signature: _____

Agency Field Instructor signature: _____