SOWK 642 (Foundation)
MSW Student Self Midterm
Spring Semester

Student: ________________________________

Field Instructor: __________________________

Suggested completion date: (March – spring semester; June – summer semester)

1. Please record an impression of your growth since last semester.

2. Please refer to the SOWK 642 educational goals and objectives and comment on the areas of strength regarding your cognitive skills and professional performance.

3. Please refer to the 642 educational goals and objectives and comment on limitations or areas of concern regarding your cognitive skills and professional performance.

4. What specific actions are you taking to prepare for termination from the agency?

5. Other comments.

Field Instructor’s Signature: ________________________________

Student’s Signature: ________________________________

Field Liaison Signature: ________________________________

Revised 10/09