THE ALABAMA STATE BOARD OF SOCIAL WORK EXAMINERS

CONTRACT FOR SUPERVISION

The **original** must be submitted to: ABSWE, PO Box 301620, Montgomery, AL 36130-1620

Supervision is defined as guidance in the professional application of social work practice defined by law. This relationship is designed to promote responsibility, competency, and accountability, which teaches the skills and techniques associated with social work practice. You may visit our website, www.socialwork.alabama.gov, for additional information regarding Supervision.

Supervisee: _____ License Number: _____
Last First Middle/Maiden OR
Approved Applicant? _____

Place of Employment: _____ Position:_____

Employment Address: _____
Mailing Address City State Zip

E-mail Address: _____ Phone:_____

Supervisor: _____ License Number: _____
Last First Middle/Maiden

Place of Employment: _____ Phone: _____

Employment Address**:** _____
Mailing Address City State Zip

E-mail Address: _____

Is this Supervision within the same Agency? Yes _____ No _____ If no, PIP # _____

Dates of Supervision: From _____ to _____.
(month/day/year) (month/day/year)

A minimum of four hours per month of supervision is required for 24 months within a 36 month period for Social Work Licensure. Supervision must be through live real-time visual contact.

Method of supervision: Group: ____ Individual: ____ Combination: ____

Practice supervised: Clinical: ____Casework: ____ Administration: ____ Community Org.: ____ Research: ____

The supervisor agrees to adhere to the confidentiality policies of the Supervisee's employing agency.If supervision is terminated by either party, the supervisor is responsible for completing the termination form within 30 days and forwarding to the Board. The total number of supervised hours at termination **MUST** be certified by the supervisor.

_____ _____
Supervisee's Signature Date Supervisor's Signature Date

ALABAMA STATE BOARD OF SOCIAL WORK EXAMINERS USE ONLY:

_____ Approved only as long as both parties remain employed within the same agency (ALA ADMIN r. 850-X-3-.01)

_____ Approved based on Supervisor licensure at PIP level (ALA ADMIN r. 850-X-3-.01)

_____ Denied

Board Representative: _____ Date:_____

Revised 10/14