

**PLYMOUTH STATE UNIVERSITY
SOCIAL WORK DEPARTMENT**

Agency Profile

Name of Agency _____

Address _____

Student Name _____

Date _____

Supervisor's Name _____

Phone Number _____

Description of Services (attach brochure if one is available)

Description of Role and Responsibilities

Description of Clients and Problems Addressed

Description of Service Delivery Techniques Used by the Agency/Program

Assessment of Major Strengths and Weaknesses of Placement as Learning Experience

Any Other Critical Information