**SOCIAL WORK CEU COURSE INFORMATION**

**Course name:**

**Sponsoring division:**

**Delivery method:**

**Class start date:**       **Class end date:**

**Class start time:**       **Class end time:**

**Class location:**       **Room:**       **Space Provision:**

**Social Work CEUs:** **Type of CEUs:**       Yes:       No:

**Licensing levels for which this class is designed:**

**Restrictions to who may enroll**:

**Minimum # attendees:       Maximum # attendees:**

**Organizational Plan:**

**Purpose:**

**Goals:**

**Objectives:**

**Competencies:**

**Other Information:**

**How this training enhances social work skills, values, and knowledge:**      

**Prerequisites:**

**Instructor qualifications:**

**Means of program evaluation:**

**Agenda:**

**Participant performance requirements:**

***Course approved for social work CEUs:* Yes No**

Secretary Phyllis Gilmore, LSCSW Date

Department for Children and Families

**Social Work CEU Class Information Instruction Sheet**

**Course name:** Title of the training

**Sponsoring division:** The DCF unit delivering or sponsoring the training (EES, PPS, etc.)

**Delivery method:** Method used to deliver the training (Classroom instructed, webinar, online, video, questions, discussion, etc.) Please provide a copy of the training material to include (but not limited to) power points, handouts, lecture notes, etc.

**Class start date:** Start date of the training

**Class end date:** End date of the training

**Class start time:** Start time of the training

**Class end time:** End time of the training

**Location:** Facility in whichthe training is being held

**Room:** If the facility has multiple rooms, the name or number of the room in which the training is being held**.**

**Space Provision:** Is there provision of accessible and adequate space? Yes/No

**Social Work CEUs:** The number of social work CEUs provided by this training

**Type of CEUs:** The type of CEUs (If not Ethics, Safety, or DSM, leave blank)

**Licensing levels for which this class is designed:** Licensed Clinical Social Worker (LCSW), Licensed Master Social Worker (LMSW), etc.

**Restrictions to who may enroll:** Is the class limited to a particular discipline? Example: This class is for Social workers only. Or this class is for Case workers only.

**Minimum number of enrollees:**  List the minimum number of persons who need to enroll for the class to be held.

**Maximum number of participants:**  List the maximum number of persons who can attend the class.

**Organizational Plan:**

**Purpose:** The purpose or rationale for taking the training

**Goals:** A listing of the goals or broad learning concepts presented in the training

**Objectives:** A listing of the objectives or what the participant will learn in the training (Remember, understand, apply, analyze, evaluate, create, etc.)

***Note:***  The format and presentation methods need to correlate with the learning objectives and content.

**Competencies:** List all competencies which will be covered in this training.

**Other Information:**

**How this training enhances social work skills, values, and knowledge:** A listing of the ways this training enhances social work skills, values, and knowledge

**Prerequisites:**  List any trainings which the participant must complete before enrolling in this class.

**Instructor(s) Qualifications:** List the instructor’s or instructors’ qualifications. At minimum provide:

· University, College or Technical School attended

· Year graduated

· Major(s) and Degree(s)

· Professional licenses held

· Current and previous experience in your area of expertise. It is preferred to note the year started (ex. 1998) rather than years of experience (ex. for 14 years)

**Means of program evaluation:** Please submit the means by which the program will be evaluated.

**Agenda:** Provide the agenda for the training (This can be in the form of an attachment if desired). Please include a breakdown to include breaks.

Example: 8-9 Subject matter #1

9-10 Subject matter #2

10-1015 Break

1015-noon Subject matter #3

Noon-1 Lunch

1-3 Subject matter #4

3-315 Break

315-4 Subject matter #5

**Participant performance requirements:** List the minimum expectation for successful completion of the class and to award CEUs. Example: Minimum attendance of 80% for instructor led classes; pass final exam with score of 80% correct for online quiz.

**Course Approved for social work CEUs:** For Strategic Development use.