SAMPLE LETTER OF AGREEMENT FOR SUPERVISION

Required when the supervisor is not employed by the ASW’s employer

Date:

ASW name:
Supervisor name:
Employer name:

This letter serves as an agreement between the employer, (Employer’s name), the associate clinical social worker, (ASW’s name), and the associate clinical social worker’s supervisor, (Supervisor’s name).

(Supervisor’s name) is not employed by (Employer’s name). However, (Employer’s name) agrees to allow (Supervisor’s name) to supervise (ASW’s name). (Supervisor’s name) agrees to supervise (ASW’s name) for (Employer’s name).

(Supervisor’s name) agrees to take supervisory responsibility for the social work services provided by (ASW’s name) as required by Chapter 14 of the California Business and Professions Code and Title 16, Division 18, Article 6 of the California Code of Regulations.

Supervisor’s Signature ___________________________ Date __________ ASW’s Signature ___________________________ Date __________

Employer’s Authorized Representative Name ___________________________ Employer’s Authorized Representative Signature ___________________________ Date __________

NOTE:
This is a SAMPLE letter. It should be written on the letterhead of the employer and signed and dated PRIOR to gaining hours of experience. The ASW is required to submit this letter with the application for examination eligibility. See Business and Professions Code section 4996.23(m) and Title 16, California Code of Regulations section 1870.

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