

**Union Theological Seminary**

3041 Broadway, New York, NY 10027

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**Office of Integrative and Field-Based Education**

Su Yon Pak, Ed.D. Senior Director and Associate Professor

Lisa Simon, Executive Assistant

**FIELD PLACEMENT CONTRACT****ALL FIELDS MUST BE FILLED IN FOR BOTH STUDENT AND SUPERVISOR**

Student's Name: _____	Supervisor's Name: _____
Address: _____	UTS Alum? Yes ____ No ____ Salutation: _____ (Ex: Rev., Dr., Ms., Mr.)
_____	Agency/Church Name: _____
Phone: _____	_____
Email: _____	Address: _____
Program: _____	_____
_____ M.Div. _____ Other	Phone: _____
Year (circle one): 1 2 3 _____ Other	Email: _____

**FIELD PLACEMENT CONTRACT**

1. Start date \_\_\_\_\_ End date \_\_\_\_\_

2. Number of hours in weekly program:

Brief description of regular tasks:

*Tasks**Scheduled Time*

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Weekly allocation of time (approximate):

Concurrent part-time student intern = 15 hrs/week for 12 weeks or 12 hrs/week for 15 weeks

Full-time internship = 35-40 hrs/week for 12 weeks

*# of hours*

Theological Reflection with Supervisor	_____
Staff Meetings	_____
Preparation	_____
Regular Tasks (see above)	_____
Total hours	_____

3. Vacation dates:

4. **Mid-year and final evaluations must be submitted.** The student and the supervisor should exchange drafts of the evaluations following the guidelines in the *Field Education Handbook*. After joint conference, both should sign final copies and submit to the Office of Integrative and Field-Based Education, AD 108. **Mid-Evaluations are due on December 13th and Final Evaluations are due on May 9th.**

5. Remuneration: \$ \_\_\_\_\_ per \_\_\_\_\_ Travel Expenses \$ \_\_\_\_\_ Other \$ \_\_\_\_\_  
A minimum stipend of a total of \$3,300 covering both academic semesters is required from participating field sites.

6. Early termination: this placement may not be terminated by either party without a joint conference between the student, the field supervisor and the Senior Director of Integrative and Field-Based Education.

This Field Placement Contract is accepted by:

Student: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

Faculty: \_\_\_\_\_ Date: \_\_\_\_\_

Send the completed Contract (**along with the Field Placement Learning Agreement**) electronically to:  
lsimon@uts.columbia.edu