

Practice unit

As of November 2024

Self-disclosure form: Binding information on practice instruction as part of the six-week study-integrated practical activity at an alternative social work organization in accordance with § 11 of the practical regulations of the BA Social Work (dual) degree program

On the basis of the Social Professions Recognition Act of the State of Berlin (§ 10), the practical studies must be instructed by a “suitable specialist”.

The practice instruction of the student _____ (name and surname)

will be assumed by _____ (name and surname).

Qualification:

- Dipl. or B.A. in social work / social pedagogy
 Comparable academic degree: _____

State approval: yes no

Relevant professional experience since: _____

Working at the practice site since: _____

Current scope of employment: _____

Phone and e-mail address: _____

The completeness and correctness of the information is assured.

Place/Date

Signature

Stamp of the practice site

Please provide this to the practice unit via the student or send it directly to the practice unit (by e-mail to praxisreferat@khsb-berlin.de or by fax to 030-50 10 10 88).