



## MARYLAND BOARD OF SOCIAL WORK EXAMINERS

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<http://www.health.maryland.gov/bswe/>

**ADVANCED LICENSURE**

### **INSTRUCTIONS FOR THE CONTRACT FOR SUPERVISION**

#### **THIS CONTRACT MUST BE SIGNED BEFORE BEGINNING SUPERVISION**

THE LMSW SUPERVISEE WILL SUBMIT THE **ORIGINAL SIGNED CONTRACT** WITH  
HER/HIS APPLICATION FOR ADVANCED LICENSURE

EXCEPT FOR SIGNATURES PLEASE **PRINT** ALL INFORMATION

USE THE BOARD'S WEB SITE [www.health.maryland.gov/bswe/](http://www.health.maryland.gov/bswe/) TO VERIFY THE DATE & STATUS  
OF THE SUPERVISEE'S & SUPERVISOR'S LICENSES & THE SUPERVISORY APPROVAL DATE

#### **1. FREQUENCY AND DURATION**

According to COMAR 10.42.08 Supervision regulations, all LMSW supervisees must *"...receive a minimum of 3 hours of face-to-face supervision per month or 1 hour of face-to-face supervision for every 40 hours worked."* In order to supervise candidates for advanced licensure the social work supervisor must be a Board approved supervisor per COMAR 10.42.08.

#### **2. DURATION AND TERMINATION**

Social work practice and social work supervision cannot pre-date the issuance date of the supervisee's LMSW license. The date all three individuals (agency administrator, supervisor, supervisee) signed the contract is the date supervision was initiated. The contract will be considered in effect until the supervisory relationship ends.

#### **3. SUPERVISION**

The Board provides additional space in section 3 on the "Contract" to encourage supervisees and supervisors to establish responsibilities and expectations unique to the teaching style of the supervisor and the learning style and training needs of the supervisee. Attach additional sheets if needed.



Review COMAR 10.42.08.07 Responsibilities of a Supervisor and COMAR 10.42.08.08 Responsibilities of a Supervisee.



#### **4. CLASSIFICATION AND AGENCY ACKNOWLEDGEMENT**

This section must be completed by an agency administrator or designee and should NOT be completed by the LCSW or LCSW-C supervisor.

#### **5. SIGNATURES OF SUPERVISOR AND SUPERVISEE**

ALL signatures need to be original **blue ink preferred but not required**. The date of the supervisee's and supervisor's signature needs to be the same as the initial date of supervision. The date of the agency administrator/designee signature should be the same date or within 5 business days.

# MARYLAND BOARD OF SOCIAL WORK EXAMINERS

**THIS CONTRACT MUST BE SIGNED BEFORE BEGINNING SUPERVISION** **ADVANCED LICENSURE**

## CONTRACT FOR SUPERVISION FOR LCSW AND LCSW-C LICENSURE

This contract is made by and between \_\_\_\_\_ (hereinafter referred to as the Supervisee) and \_\_\_\_\_ (hereinafter referred to as the Supervisor).

The supervisor agrees to provide supervision in compliance with the requirements for independent practice work licensure in the State of Maryland and in accordance with the terms below. The parties mutually agree to the following:

### 1. FREQUENCY AND DURATION

Sessions shall be held in accordance with the regulatory requirement of 3 hours of face-to-face supervision for full time employment (40 hours a week) or 1 hour of face-to-face supervision for every 40 hours worked for part-time employment.

(All supervision must be direct face-to-face. Only 72 hours (50 LCSW) of group supervision may count towards the 144 hours (100 for LCSW) of supervision required for advanced licensure. The group supervisor shall provide supervision to no more than six supervisees.)

### 2. DURATION AND TERMINATION

This contract is effective as of the date of signing; will remain effective until the supervisory relationship ends; and may be terminated immediately if the supervisor does not maintain the necessary qualifications.

### 3. SUPERVISION

A. The supervisor shall:

- 1) Qualify as a Board approved LCSW or LCSW-C in Maryland and maintain this designation for the duration of the supervision.
- 2) Provide or ensure that a supervisee receives a minimum of 3 hours of face-to-face supervision per month or 1 hour of face-to-face supervision for every 40 hours worked.
- 3) Conduct supervision according to the standards outlined in Maryland Health Occ. Code Ann. ("H.O.") §19-302 of the Social Work Practice Act (H.O. §§ 19-101 et seq.) and Regulations governing the Practice of Social Work COMAR 10.42.01 through 10.42.08.
- 4) Provide a copy (to the supervisee) of the Board's supervisory approval which can be found on the Board's website under the verification section. (www.health.maryland.gov/bswe)

B. The supervisee shall:

- 1) Obtain social work experience after obtaining a Licensed Master Social Work license.
- 2) Receive a minimum of 3 hours of face-to-face supervision per month or 1 hour of face-to-face supervision for every 40 hours worked.
- 3) Be knowledgeable about Maryland Health Occ. Code Ann. ("H.O.") §19-302 of the Social Work Practice Act (H.O. §§ 19-101 et seq.) and Regulations governing the Practice of Social Work COMAR 10.42.01 to 10.42.08.
- 4) Obtain a copy of the Board's supervisory approval which can be found on the Board's website under the verification section. (www.health.maryland.gov/bswe)

### 4. AGENCY ACKNOWLEDGEMENT

(This section should not be signed by the supervisor listed above. It must be completed and signed by the supervisee's employer at the time the contract is initiated. The supervisor may be an agency based supervisor or an independent supervisor, in either situation the agency administrator must sign. The supervision is accountable to the supervisee's employer. Please indicate the supervisor's designation by selecting one of the options, signing and dating this section.)

The supervisor is: Agency Administrator's Signature \_\_\_\_\_ Date

Agency Supervisor Blue ink preferred but not required.

Independent Supervisor Agency Administrator's Name & Title \_\_\_\_\_

### 5. SIGNATURE OF SUPERVISOR AND SUPERVISEE

Supervisor Signature \_\_\_\_\_ Supervisee Signature \_\_\_\_\_

Date  Blue ink preferred but not required. Date