**BHWISE SUDWE Commitment Letter**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(print name), am eager to gain skills in substance use treatment and integrated behavioral health practice and to join the behavioral health workforce, providing care to vulnerable and underserved populations upon graduation. If I am accepted into the Behavioral Health Workforce Integration Service and Education (BHWISE) **SUDWE** Fellowship program, I commit to the following actions:

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| **Initials** | **Commitment:** |
|  | 1. I will complete my **assigned Advanced Field Placement at an approved BHWISE SUDWE Field Agency**, where I am providing clinical behavioral health services which may include work with individuals receiving treatment for substance use disorders. |
|  | 1. I will **complete all required coursework** for BHWISE SUDWE trainees to build my practice skills as well as **actively participate in monthly Integrative Field Seminar** sessions with my BHWISE colleagues. |
|  | 1. Upon graduation from UM School of Social Work and completion of the BHWISE SUDWE Fellowship, **I will pursue employment opportunities** practicing integrated behavioral health especially in settings providing evidence-based substance use treatment**.** |
|  | 1. During my time in the program as well as a BHWISE graduate, **I will participate in any data collection or evaluation efforts** to provide input on the program’s impact, **including demographic information.** This may include surveys and/or focus groups. 2. I also agree to have my course grades, course evaluations, field evaluations, and other academic records shared with the BHWISE evaluation team. |

I understand that in exchange for participating in the BHWISE program, I will receive a $15,000 stipend during my advanced year placement, in two disbursements. I also recognize that the stipend may impact my financial aid award.

I will also receive opportunities for additional training in integrated behavioral health and interprofessional practice through the BHWISE SUDWE program.

My signature below confirms that I understand and am committed to full participation in the BHWISE SUDWE program.

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Signature Date