



Louisiana State Board of Social Work Examiners

18550 Highland Road, Suite B

Baton Rouge, LA 70809

Telephone: 225-756-3470 Toll-free in LA: 800-521-1941

Employment Verification

*An **original** employment verification form must be submitted for each place at which the social worker is employed in Louisiana after receiving the MSW degree. LMSWs that are under LCSW-BACS supervision must submit this form with the Supervision Agreement/Plan of Supervision.*

LMSWs must be social work employees as defined in the Rules, Standards and Procedures.

Social Work Employee - Such status requires that the social worker provides direct or indirect social work services, receive remuneration from an employer for these services, and that the social worker's employer deduct federal withholding tax, and FICA or other retirement benefits from the salary or wages.

R.S. 37:2707. C., states that a LMSW shall be permitted to provide social work services on behalf of a federal, state, or local governmental agency on a contractual basis.

LMSWs that are providing social work services to a governmental agency on a contractual basis, must submit a copy of the contract to LABSWE.

I, _____, _____,
(Type or print name of agency representative*) (Representative's title)

certify that _____, LMSW, is an employee of
(Type or print name of employee)

_____ as defined above.
(Type or print name of agency)

I further certify that he/she practices social work at least _____ hours per week.

Effective date of employment: _____
(month/day/year)

Ending date of employment: _____ (if applicable)
(month/day/year)

(Signature of Agency Representative)*

(Agency Address)

(City, State, Zip Code)

*Must be signed by Agency Director, Executive Officer, CEO or Director of Personnel.