



CASA Volunteer Evaluation Form

VC – FSS – Placement – Provider - Attorney



In order to improve our advocacy services we would like your assistance. Please answer the following questions below. All information will be kept confidential. In the event more information is desired as follow up, the Executive Director will contact you directly for the information and your approval to address with any necessary individual.

Thank you in advance for sharing your opinions and experience with us.

Name of person completing evaluation (optional): _____

Advocate To Evaluate: _____ **Evaluation Date:** _____

Please circle your role: **VC** **FSS** **Placement** **Provider** **Attorney**

Please check the box to indicate your rating

| | Very Good | Satisfactory | Needed Improvement | No Knowledge |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| Interaction with child(ren): | | | | |
| 1. Attire when with child(ren) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Attitude with child(ren) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Relationship with child(ren) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Kept appropriate boundaries | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Asked appropriate questions | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Kept appointments with child(ren) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Interaction with you: | | | | |
| 7. Attire when with you | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Attitude when with you | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Kept appropriate boundaries | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Asked appropriate questions | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Kept appointments | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Maintained professionalism | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Overall: | | | | |
| | Yes | Unsure | No | |
| 13. In your opinion, was having a CASA beneficial for the child | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 14. In your opinion, was your experience with CASA a positive experience | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

15. What, if anything, was most beneficial to having a CASA volunteer on the case?

16. What would you suggest being done differently in the future in regards to CASA?

17. Any additional thoughts?