**CAUSE NO. CV**

**IN THE INTEREST OF**

Child/Children’s names

**CHILD/REN**

**§ IN THE DISTRICT COURT**

**§** OF

**§ MONTGOMERY COUNTY**

**§ TX**

**§**

**§ \_\_\_\_\_\_\_ JUDICIAL DISTRICT**

**§**

**CASA CHILD ADVOCATE REPORT**

**(Enter Date of Court Hearing)**

**Introductory Information**

**Child’s Name: Date of Birth:**

 **Type of Placement:** Foster care, relative placement, RTC, etc**.**

**Date Assigned to CASA:** Date you signed Certificate of Acceptance

**Date CASA Reviewed CPS File:** Date you reviewed CPS case file

**Date in Custody:** Date child was removed (on Affidavit)

**Date all Parties Notified:** Date Supervisor sent notification

**Reason Child Came Into Care:** Summary of why children were brought into care. Two or three sentences only!

**Permanency Goal:** This is the Department’s Goal

**Concurrent Goal:** This is the Department’s Goal

**SERVICE REQUIREMENTS AND PROGRESS:** What services have the parents completed and what services still remain to be done. (Discuss this with the parents and confirm with CPS caseworker. If parents are not working services, let their attorney know.) List any meetings (FGC, PC, etc.), dates, who attended and result of meeting.

**Mother:**

**Father:**

**PLACEMENT:** Where is the child currently placed (foster care, relative care, RTC, etc.)? How long has the child been in the current placement? How is the child doing in the current placement? Are child’s basic physical and emotional needs being met? Are siblings placed together? If not, why? If not placed together, what efforts are being made to get them in the same placement, if appropriate? Note any observations or concerns about placement.

**KINSHIP CONNECTIONS**: What efforts are being made to find relative or fictive kinship placements or life-long connections? Has a home study been ordered on any relatives? If so, what were the results of the home study?

**VISITS:**

**CASA/Child Visits:** List dates and place of visits between CASA and child. Note any observations or concerns.

**Parent/Child/Sibling Visits:** List dates and place of visits between parent/child/siblings. Is visitation schedule adequate/realistic? Note any observations or concerns. (You may note observations made by CPS caseworker.)

**EDUCATIONAL:** Include current grade, updated progress reports, academic functioning and any special needs. List any meetings, (ARDs, etc.), date, who attended and result of meeting.

**MEDICAL:** List date of any assessments and diagnosis. List medications and amounts. Is child in counseling? If so, how is he/she progressing? Are child’s immunizations up to date? Are there any dental needs? Are all medical needs being met?

**CONCERNS:** Any concerns you have that have arisen *since the last court hearing*.

**Recommendations for the Best Interest of the Child/Children:**

Recommendations should address your concerns and/or issues that you have at the time of writing the court report that have not been addressed previously. Only recommend services that have not been previously court ordered.

Are you in agreement with the Department’s goal? If not, what is your recommendation?

Are you in agreement with the placement? If not, what is your recommendation?

***Persons Contacted:***

|  |  |  |  |
| --- | --- | --- | --- |
| ***Name*** | ***Relationship*** | ***Type*** | ***Date*** |
| Contact’s Name (do not list name of foster parents, use FP) | Child, Caregiver, Parent, Therapist, etc. | Phone call, e-mail, face-to-face, text |  |
|  |  |  |  |
|  |  |  |  |

*Respectfully submitted,*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

**Print Name: Print Name:**

**CASA Volunteer Date CASA Supervisor Date**