IN THE CIRCUIT COURT OF CRAWFORD COUNTY, ARKANSAS

JUVENILE DIVISION

NO. JV-xx-xx

Name:

DOB:

Age:

Gender:

Total Placements:

Days in Custody:

**Re:**

 **Insert**

 **Pic**

**COURT APPOINTED SPECIAL ADVOCATE REPORT**

Date of Report:

Date of Hearing:

Type of Hearing:

Persons Interviewed / Met With:

Records Reviewed:

Background Information:

Child Developments Since Last Hearing:

Parent’s Progress Towards Case Plan Goals and Order of the Court:

|  |  |
| --- | --- |
| **Court Order, Case Plan Item & Brief Description** | **Status** |
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Other Relevant Information Concerning Parents, Relatives or Others Involved:

Child Concerns and Wishes:

CASA Conclusions & Recommendations:

Respectfully Submitted:

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CASA Volunteer Melanie Allen, Advocate Supervisor

Submitted: date Rebecca Gibbons, Executive Director