

Confidential YOUTH Court Information

This report was written by the youth named below to provide an opportunity for him/her to present his/her personal input and information to the Court. This report has not been edited or modified by the youth's CASA volunteer or CASA staff. This report is confidential in nature for the benefit of the Court and may be distributed only to parties to the proceeding.

General Information

Youth's Name	DOB
Docket Number	Current Placement
Hearing Date and Time	Report Date
CASA Volunteer Advocate	Supervisor

Instructions for youth

You should be very clear in your writing. Be respectful and honest about your individual situation. If there is something you feel the Court should know about you or your situation, this is your chance to present the information. Your CASA volunteer will submit this report to the Court on your behalf and will not edit or modify your report. You may use this template to type your report or hand write it. It is important you understand that while the Court values your input, it is up to the Judge to decide if your recommendations are followed by the Court.

Current Situation

How old are you?

How long have you been in foster care?

Are you satisfied with your current placement? Yes No

If no, what do you dislike?

Do you feel safe at your current placement? Yes No

If no, who or what makes you feel unsafe?

Are your basic needs being met (getting enough to eat, etc)? Yes No

If no, please explain

Case Information:

Which of these people/groups have you see or talked to in the last month: Mom Dad
Foster Parents Sibling(s) CASA Volunteer Caseworker Therapist
Counselor Teacher(s)

Are you being prevented from seeing or talking to someone? Yes No
If yes, explain

Health:

Describe any current dental or physical health problems

Are you receiving treatment? Yes No
If no, what is preventing you from receiving treatment?

Describe any current mental health problems

Are you in counseling/therapy? Yes No
If you are attending therapy do you find it helpful?
If no, why do you feel therapy is not working for you?

Education:

Are you currently attending school? Yes No
If no, why are you not in school?

If yes, is your school experience mostly positive or negative? Please explain.

What grade are you in?

How are you doing in school?

What are your goals for school?

Education (Cont'd):

Are you participating in extracurricular activities? Yes No
If no, what is preventing you from participating?

If yes, explain

Employment:

Are you currently working? Yes No
If no, what is preventing you from working?

If yes, explain

Permanent Home:

Where would you like to live and why?

Personal Concerns/Goal

What is your biggest concern?

What are your plans for your future?

How can the court help you pursue your goals?

Is there any other information you would like the court to know?

Is there something you would prefer to share with someone in private? Yes No

(Ages 13-18)

An **independent Living Plan** is a written guide to prepare for living on your own once you have aged out of foster care. The plan may include goals for completing education, securing employment, finding affordable housing, managing finances, etc. (Independent Living Planning begins at age 13).

Have you developed Independent Living Goals with your case worker?

Did you take an active role in developing your Independent living goals?

(Ages 17-18)

A formal transition planning meeting takes place prior to your 17th birthday and again 90-days prior to your 18th birthday.

Did you have a Transition Planning meeting?

Where you active in leading that meeting?

Were you allowed to invite anyone to your Transition Planning Meeting?

Do you feel your Transition Planning Meeting was helpful in preparing you for independence?

Yes No

If no, explain

Do you have an Independent Living Plan? Yes No

Are you satisfied with your Independent Living Plan? Yes No

Are you being prepared to live on your own once you age out of foster care? Yes No

This report and the accompanying recommendations are respectfully submitted by:

Name

Date