



McLean County CASA (Court Appointed Special Advocates)

200 W. Front Street, Suite 500 B

Bloomington, Illinois 61701

(309) 888-5656

FAX(309) 888-4969

Date: _____

Name of applicant: _____

(Instructions to applicant: Please provide this letter to the person serving as a reference or submit the letter to the CASA office upon completion.)

To Whom It May Concern:

The person named above has applied to work as a volunteer in the Court Appointed Special Advocate (CASA) program and has listed you as a reference. We would appreciate your written assessment of the applicant's ability to serve as a volunteer in our program. Please use the form included with this letter for your assessment.

The following is a brief program description which may assist with your assessment of the applicant. A CASA volunteer is a citizen who has been sworn as an Officer of the Court and appointed by a judge to advocate for children who have been abused or neglected and are residing in the foster care system. A CASA gathers information, makes recommendations, and provides written reports to the court based upon their observations and interactions with the child, family members and other professionals involved in the child's life.

The advocacy a CASA provides requires a high degree of responsibility and commitment to the well-being of children. It is essential that a CASA has the ability to respect confidentiality, relate to people from many different walks of life and remain objective in their evaluations.

Thank you for your prompt attention to this request. If you have any questions, please feel free to contact Mary Pat Frugo-Anderson at 309-888-5852 or Marypat.frugo-anderson@mcleancountyil.gov. Thank you very much for your time.

PERSONAL REFERENCE FORM

(please print)

1. In what capacity have you known the applicant? _____

For how long? _____

2. Would the applicant have a problem working with individuals with any of the following?

Different race _____ Physical/mental disability _____ Other _____

Please explain: _____

3. Please rate applicant on the following characteristics:

	<i>Above Average</i>	<i>Average</i>	<i>Below Average</i>	<i>Don't Know</i>
Takes initiative	_____	_____	_____	_____
Completes tasks	_____	_____	_____	_____
Positive attitude	_____	_____	_____	_____
Attention to detail	_____	_____	_____	_____
Ability to work with children	_____	_____	_____	_____
Ability to work with adults	_____	_____	_____	_____
Willingness to accept supervision	_____	_____	_____	_____
Oral communication	_____	_____	_____	_____
Ability to maintain confidentiality	_____	_____	_____	_____

4. Please explain why you believe the applicant would be a successful advocate for children:

=====
Name of person completing this form: _____

Signature: _____

Address: _____

City/State: _____

Email: _____

Date: _____

Cell: _____

Work: _____

Home: _____