



CASA Background Information

Date Completed

Legal Name (First M. Last):			
CASA Name (First Last):			
DOB:		Personal Email:	
Emergency Name/Relationship:		Contact #	

Home Address:			
Home Phone:		Personal Cell Phone:	
Work Phone:		CASA Cell Phone	
Preferred Phone # for CASA staff to get in touch with you:		1)	2)

DEMOGRAPHICS			
Gender:		Race:	
Languages Fluent In:		Ethnicity:	
Marital Status:			
Employer Name:		Title:	

Information for CASA Background Information Record

In accordance with RCW 13.34.100, the CASA program shall maintain a background information record for each CASA in the program. Please provide the information requested below to assist in our efforts to prepare this document:

EDUCATION		
Total Years Education Completed:	Completion of High School = 12 years Add on 1 year for each completed year of college, graduate school, etc.	Total Years = <input style="width: 40px; height: 20px;" type="text"/>
List All Degrees, Licenses, Certifications Completed		

1.	List specific training you have related to issues potentially faced by children in the dependency system:
2.	List specific training you have or education related to child disability or developmental issues:

