



CASA of Harford County

The Circuit Court for Harford County
101 South Main Street, Suite 303 • Bel Air, Maryland 21014
410-638-4938 • 410-420-6740 (Fax) • www.casaofharfordcounty.org

Ross P. DiEdoardo, Director

CASA VOLUNTEER PERSONAL REFERENCE FORM

(PLEASE PRINT)

FROM: _____ CONCERNING: _____

(ALL INFORMATION WILL BE HELD CONFIDENTIAL IN EVERY RESPECT)

1. In what capacity have you known the applicant? _____
For how long? _____
2. Do you have knowledge of how the applicant relates to children? Yes ___ No ___
If yes, please explain _____

3. Can the applicant separate personal life from volunteer work experience? _____
4. How well does the applicant finish projects and activities begun?
Very well ___ Well ___ Average ___ Fair ___ Poor ___
5. To your knowledge, has the applicant ever had a drinking or drug problem? _____
6. Do you feel that the applicant is in a position to make a year-long commitment to a child?

7. Would you be comfortable having the applicant serve as a Court Appointed Special Advocate to a child? _____

PLEASE USE THE BACK OF THIS SHEET TO DISCUSS YOUR OVERALL REACTION TO THIS APPLICANT. THANK YOU FOR YOUR COOPERATION.

Signature

Date