

(Place your program logo, address, phone and fax, and website information here)

CASA VOLUNTEER EVALUATION FORM

COMPLETED BY SUPERVISOR

Name		Position			
Period of Evaluation		Number of Children Assigned			
Supervisor					
Professionalism	Needs improve- ment	Fair	Good	Very Good	Superior
Understands purposes and goals of CASA					
Understands & complies with confidentiality in client responsibilities					
Relates well with public					
Exhibits poise in handling difficult situations					
Exhibits sincere interest and respect towards clients and work					
Responsibility					
Reliable about schedule and time commitment					
Completes assignments in a timely fashion					
Pays attention to detail					
Willing to take on assignments					
Effectiveness					
Welcomes opportunities to learn information or procedures that will make work more effective					
Follows through on assignments					
Willing to ask questions when in doubt					
Gathers and facilitates sharing of information as appropriate					
Reports are fact based and child focused					
Benefits to staff working with this volunteer are:					
Benefits to program from this volunteer's skills, experience and knowledge are:					
Additional Comments					
Signature of Volunteer		Date			
Signature of Supervisor		Date			