

100 High Street, Suite 301 Mt. Holly, NJ 08060

Phone: 609.265.2222 Fax: 609.265.2220

www.casaofburlingtoncounty.org

Date

Resource Parent/Bio Parent Name

Address

Dear Mrs./Mr. \_\_\_\_\_\_\_\_\_\_\_\_,

CASA of \_\_\_\_\_\_\_\_\_\_\_\_\_\_ County has received orders from Judge \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to appoint a volunteer Court Appointed Special Advocate (CASA) to (child’s name). CASA is an independent, non-profit organization that recruits volunteers to advocate for the rights of children. Our agency and volunteers work diligently to ensure that the children we represent receive the services they need to help them achieve a safe, permanent home.

We have assigned our volunteer, \_\_\_\_\_\_\_\_\_\_\_\_\_\_, to work with (child’s name). In order to effectively advocate for her, (Advocate’s name) would like to speak to you regarding her behavior in your home, as well as discuss any concerns you have regarding (child’s name). It is also our desire to assist you with obtaining any services you feel (child’s name) will need. (Advocate’s name) will be contacting you in the near future to set up a visit/telephone call at your convenience.

Please note that the CASA volunteer is required to visit the child at least twice per month in the home, in order to present a clear picture to the judge of the children’s needs and progress.

If you have any questions regarding the court appointment or role of a CASA volunteer, feel free to contact me at \_\_\_\_\_\_\_\_\_\_\_\_.

Thank you in advance for your cooperation and we look forward to working with you.

Sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name

Case Supervisor

CASA of \_\_\_\_\_\_\_\_\_\_\_ County