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| Text  Description automatically generatedCASA VOLUNTEER NO CONTACT FORM |

This report is due on the **5th OF EACH MONTH** for the prior month’s activities. This form is to only be completed and submitted if no contact was made with the child(ren) in the case for the month.

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| **CASA Volunteer’s Name:** | |  | | | | | **Month/Year:** | |  | | |
| **Child(ren) Name:** |  | | **DOB:** |  | **Case No:** |  | |  | |  | |
|  |  | |  |  |  |  | | **Next Court Date:** | | |  |
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| Judge |  | **DCF** |  | **KVC** |  | **GAL** |  |

Please provide an explanation below for the reason a face-to-face visit was not completed with the child(ren) on the case this month.

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| INSERVICE FOR THE MONTH | | | | |
| ***Please attach copy of proof of Inservice. i.e.: certificate of attendance, agenda, etc.*** | | | | |
| **Name of**  **Inservice** | |  | | |
|  | | | | |
| **Date:** |  | | **Hours:** |  |

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