Video / Television Show Synopsis

 Your Name Date

Program Title:

If a television program, when it aired:

Sponsor, if pertinent:

Participants, if applicable:

Give a brief summary of the program. Tell how you expected it to add to your knowledge, and if the program met your expectations. What, if anything, did you learn that you could apply to your work with CASA?

Is there anything you learned that you would like to share with other volunteers and CASA staff?

Do you have a copy of the program that you would be willing to share?

Signature of CASA Staff

In-service hours: 1

Please send completed form to your Case Supervisor.