



## CASA of Shawnee County, Inc. CONTINUING EDUCATION REVIEW FORM

Please submit this form to request in-service credit for continuing education. Credit is awarded for any type of educational activity that is approved by your Advocate Coordinator. Return completed form to your assigned Advocate Coordinator by email or regular mail.

CASA Volunteer's Name: \_\_\_\_\_

Advocate Coordinator: \_\_\_\_\_

Circle One: Conference      Lecture      Course      Book      Video      Other: \_\_\_\_\_

Title of In Service Activity: \_\_\_\_\_

Date Completed (MM/DD/YY): \_\_\_\_\_

Author/Presenter: \_\_\_\_\_

Credit to be Awarded: \_\_\_\_\_

1. Briefly, describe the content.
  
  
  
  
  
  
  
  
  
  
2. What did you learn that is relevant to your work as a CASA? Please be specific while maintaining the anonymity of your CASA family.
  
  
  
  
  
  
  
  
  
  
3. What did you learn that you would like to share with other CASAs? Would you recommend this in-service training to others?
  
  
  
  
  
  
  
  
  
  
4. Please answer any article-specific instructions for this article in the space below.

5. Extra Space for Responses: