|  |  |
| --- | --- |
| Date: | [today's date] |
|  |  |
| To: | [Name of CPS Caseworker], CPS Caseworker  [Name of CPS Supervisor], CPS Supervisor |
|  |  |
| **Subject:** | **Court Appointed Special Advocate (CASA) Request to provide and/or remove access to Case Information in Case Connection** |
|  |  |

[Name of Local CASA Organization] has been appointed as the [Role] for:

|  |  |
| --- | --- |
| **Name of Child:** | **[First and Last Name of Child]** |
| **Date of Birth:** | **[Child's Date of Birth]** |
| **Cause Number:** | **[Child's Cause #]** |

1. Please provide electronic access to the child's case information for the following individuals:

|  |  |
| --- | --- |
| Name of CASA Volunteer |  |
| Volunteer's PID |  |
| Name of CASA Supervisor |  |
| Supervisor's PID |  |

1. Please remove electronic access to the child's case information for the following individuals:

|  |  |
| --- | --- |
| Name of CASA Volunteer |  |
| Volunteer's PID |  |
| Name of CASA Supervisor |  |
| Supervisor's PID |  |

*Note:*

*Use the 'Remove Electronic Access' section only for volunteers that remain affiliated with your Organization but are no longer assigned to a specific case. If the volunteer is no longer affiliated with your Organization, your IAM Designated Representative must terminate the individual's Case Connection account in IAM in lieu of completing this form.*

I will be the CASA Caseworker Supervisor working on this case. Please do not hesitate to call me with any questions.

The CASA Supervisor named above will be working/supporting the volunteer on this case. Please do not hesitate to call if there are any questions

Sincerely,

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

[Name of CASA Supervisor or Name of CASA Representative/Job Title]