

CASA Program Exit Survey

Please help us improve our program by taking a few minutes to complete this survey.



CASA Name:

Date Completed:

County:

1. I have been a CASA for:

Less than one year

1 - 3 years

4 - 10 years

Over 10 years

2. Reason for leaving the CASA Program:

Employment Situation

Family needs

Time commitment too great

Frustration with system

Health Issues

Moving from the area

Burn out/stress

Other

3. Did e-communications from the CASA Coordinator/staff work well for you?

Yes

No

Comments

4. How frequently did you check your e-mail for CASA communications?

Twice or more daily

Once daily

Several times a week

Weekly

Less than once a week

5. What would have been your preferred method of communication from the CASA staff to you?

E-mail

Telephone

US Mail

Comments:

6. Were there any unresolved barriers you encountered while working as a CASA?

Yes No

If yes, please explain:

7. What was most difficult about being a CASA?

8. What was most rewarding about being a CASA?

9. May we use your experiences as testimonials? Yes No

10. Additional comments about CASA, the program, staff or your experience:

*Please accept our deep appreciation for your service to Iowa's children who have been abused and neglected.
Best wishes in your future endeavors.*

Please return this form to your CASA supervisor.