## THE STATE OF NEW HAMPSHIRE

JUDICIAL BRANCH

https://www.courts.nh.gov

Court Name:

Case Name:

Case Number: (if known)

## CASA GAL/GAL COURT COVER SHEET CHILDREN AND YOUTH IN RSA 169-C COURT HEARINGS

Yes No

Child's/Youth's Name: \_\_\_\_

Court Hearing Type & Date: \_\_\_\_

## A. INFORMATION ABOUT THE COURT HEARING

1. Does the child/youth **plan to attend** the upcoming court hearing? **If no,** please indicate the reasons the child/youth will not attend:

If the child/youth does not plan to attend the hearing, please include a recent picture of the child/youth.

2. Does the child/youth plan to speak to the judge at the upcoming hearing?

If yes, please indicate the child's/youth's preference as follows:

child/youth would prefer to speak to the judge in front of the parties at the hearing, OR

child/youth would prefer to only speak to the judge, in the presence of a court staff person, in
the courtroom. If the child/youth is interested, their CASA GAL/GAL can join them for these
brief conversations. Any conversations with the judge are not confidential and will be
recorded, as is done with all parts of the court hearing.

3. Has the child/youth chosen to "**otherwise participate**" in the court hearing by submitting to their CASA GAL/GAL a letter, photograph and/or drawing for the court and parties?

If yes, please attach what the child/youth has submitted to this Cover Sheet and Court Report.

4. Are there RSA 169-C Orders of Protection that require a parent(s) to stay away from the child/youth?
Yes No

**If yes**, please describe the RSA 169-C Order of Protection and if a separate waiting area is required for a child/youth to wait until the RSA 169-C hearing is called:

**If no**, please describe if there are other court orders or circumstances that warrant a separate waiting area for a child/youth to wait until the RSA 169-C hearing is called:

Case Name: Case Number: CASA GAL/GAL COURT COVERSHEET					
В.	<b>B. GENERAL INFORMATION ABOUT THE CHILD/YOUTH</b> To be filled out whether or not a child/youth plans to attend the upcoming court hearing				
1.	Child's/youth's preferred name or nickname:		Age:		
2.	School:	Current grade:			
	Recent achievements:				
4.	Special interests/activities:				
	Temperament/personality:				
6.	Developmental/educational/health care/mental health care concern(s):				
7.	Child/youth's current living arrangement:				
8.	Sibling relationship(s):				
9.	Relationship with each parent:				
10	Expressed Interests: Do the child's/youth's expressed interests conflict with the recommendation for dispositional orders of the CASA GAL/GAL and/or does the child/youth disagree with a recommendation being made by the CASA GAL/GAL? See RSA 169-C:10, II(a) and GAL Board Rule 504.01(e).				
<b>If yes</b> , please explain:					
<ul> <li>11. If a permanency hearing is scheduled, has the CASA GAL/GAL consulted the child/youth about the proposed permanency plan of? Yes No</li> <li>If yes, does the child/youth agree with the proposed permanency plan? Yes No</li> </ul>					
Dat	ite c	ignature of CASA GAL/GAL			
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	F	rinted Name of CASA GAL/GAL			