

# In-Service Training Request Form

## Personal Information

**Name:**  **Date Completed:**

**Hours Completed:**  **Check the Applicable Resource:**

### Select type or purpose of topic:

<input type="checkbox"/>	Knowledge/skills (increase ability to perform CASA responsibilities)
<input type="checkbox"/>	Cultural competence/values (cultural and social-economic information)
<input type="checkbox"/>	Increase understanding of children's behavior, family interactions and agency performance

**Title of Training or Resource:**

**Author/Speaker/Source:**

**Pages/Length of Book/Film (if applicable):**

**Answer the following questions and rate the resource. Use additional space if needed.**

1.) What two new things did you learn from this resource?

2.) How will you use this new information in your role as a CASA/GAL Volunteer?

3.) Why did you choose this resource?

**Submit completed forms to Aislynn Ward at [award@co.lucas.oh.us](mailto:award@co.lucas.oh.us)**