

## LASALLE COUNTY CASA MONTHLY TIME LOG

Advocate: \_\_\_\_\_ Case: \_\_\_\_\_ Reporting Month: \_\_\_\_\_

**\*\*\*Please express all time in hh:mm format; for example 15 minutes = :15. One hour and 45 minutes = 1:45.\*\*\***

**Child Visits** (Advocates are responsible for a minimum of 2 face-to-face child visits per month.)

Date	Contact Code	Location Code	# Children Present	Notes <i>(If not all children present, please note here)</i>	Time spent (hh:mm)	Travel Time (hh:mm)	Mileage
<b>TOTAL</b>							

**Collateral Contacts/Meetings/Court Attendance & Other Case-Related Activities**

Date	Activity Code	Contact Code	Location Code	Notes	Time spent (hh:mm)	Travel Time (hh:mm)	Mileage
<b>TOTAL</b>							

**Webinars, Conferences & In-Service Training**

Date	Notes (Please specify type of training & title)	Time spent (hh:mm)	Travel Time (hh:mm)	Mileage
<b>TOTAL</b>				

<b>MONTHLY TOTALS</b>	Time spent (hh:mm)	Travel Time (hh:mm)	Mileage

**Contact Codes**

1 Face-to-face	2 E-mail	3 Phone Call	4 Text	5 Skype/Facetime	6 Other
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**Location Codes**

1 Biological Parent(s)' Home	2 Foster Home	3 School	4 Court	5 CASA Office	6 DCFS
7 YSB	8 CYFS	9 Residential Placement	10 Phone	11 Computer	12 Other

**Activity Codes**

1 CASA Staff contact	2 Biological Parent contact	3 Foster Parent contact	4 Other Relatives/Fictive Kin contact
5 School Personnel contact	6 Supervised Visit	7 Attended Court	8 Caseworker or Aide contact
9 ATL (Attempt to Locate)	10 Therapist/Physician contact	11 ACR/IEP/Meeting	12 Court Report preparation
13 Notes/Research	14 Monthly Time Log preparation		