OCN Legal Consultation Intake Form

Please forward your Confidentiality and Conflict of Interest agreements to Kristen Lewis at OCNLegal@oregonCASAnetwork.org for signature.

Discreet Legal Question

1. Please state your question or issue, and be as specific as possible:

Case Consultation

- 1. Name of Program/Executive Director:
- 2. Name of Supervisor:
- 3. Name of CASA:
- 4. Name of Circuit Court:
- 5. Case number:
- 6. Name of judge or referee:
- 7. Names and clients of all attorneys:
- 8. Names and ages of all children:
- 9. Current plan:
- 10. Placement of all children (please note familial relationship of resource parent if applicable):
- 11. Names of parents and sustained allegations against them:
- 12. Special needs and/or diagnoses of children:
- 13. Type of upcoming hearing if applicable:
- 14. Main reason for requesting consultation:
- 15. Specific goals and expectations for representation:
- 16. Specific questions:

Please attach the most recent CASA report

If confidentiality was protected, would you be willing to invite other programs to all or part of your consult zoom?