

BENCHMARK CONFERENCE
Conference Date: _____

YOUTH'S REPORT TO THE COURT

Youth's Name: _____ Age: ____ Judge/Master: _____
My friends call me: _____ My best friend is: _____
I wrote this report: ____ by myself; with the help of: _____
When do I feel safe? Or not safe? _____
Do I need go to the doctor, eye doctor or dentist? _____
My favorite activities/hobbies are: _____
My favorite books/stories/movies are: _____
My favorite foods are: _____
Things I would like to change about my visits are: _____
Things I like about my parents are: _____
I have _____ brothers and _____ sisters; I want to / do have visits with them.
Some of the traditions my family celebrates are: _____
Things that worry me are: _____
I attend _____ School/College. I am in the _____ grade.
Things I like about school are: _____
Things I dislike about school are: _____
My favorite teacher is: _____
Some things that upset me are: _____
When I feel upset I usually turn to: _____ for support/encouragement.
Some things that make me happy are: _____
The things that are most important to me are: _____
The people that are most important and influential to me are: _____
What I would like to do that I have not been able to do is: _____
I do / do not want a Court Appointed Special Advocate (CASA) in my case.
If I were the Judge/Master, I would: _____
I would like the Judge/Master to know: _____
My current address is: _____

DREAM SHEET

What are my goals? Where do I want to be in 5 years?

What kind of future do I want to have?

What difficulties do I expect along the way?

How might I deal with those difficulties?

Which friend(s) would be most helpful in helping me cope?

YOUTH'S SIGNATURE: _____ DATE: _____