

The most important part of any migration process is ensuring the quality of the data that is transferred from the old database to the new database. All information transferred to the new database should be the most accurate and thorough information possible. This will increase the likelihood of promoting positive data entry practices in the new database.

Client Demographic Information including:

- Date of Birth
- Ethnicity
- Primary Language
- Secondary Language
- Home County
- Number of Months in Prior Placements
- Number of Placements before assigned to CASA

Case Information

- Date Child Taken into Care
- Date Child assigned to CASA
- Referral Source
- Other Referral Source
- Removed from Home?
- Date Removed from Home
- Removed from:
- Date of Most Recent Reasonable Efforts Determination
- Status of Case at Program Assignment
- All Case Closure information
 - Date Court Closed the Case
 - Reason for Court Closure
 - Other Reason for Court Closure
 - Placement at Court Closure
 - Other Placement at Court Closure
 - Reason for Program Closure
 - Other Reason for Program Closure
 - Date Program Closed Case
 - Was the CASA Permanent Placement Recommendation Accepted?
- Was the CASA Volunteer's Placement Recommendation Different?
- ClosingNotes

CASA Assignments Information

- Volunteer Assignments
- Start Date and End Date of Volunteer Assignments
- Case Supervisor Assignments
- Start Date and End Date of Case Supervisor Assignments
- Case Worker Assignments
- Start Date and End Date of Case Worker Assignments
- Attorney Assignments
- Start Date and End Date of Attorney Assignments

Placement Information

- Placement Facilities

- Address and all pertinent contact info for Placement Facilities
- Reason for Placement
- Placement Type

Petition information

- All persons alleged against, all allegations and all original/negotiated outcomes

Interested Persons

- All persons and contact info up-to-date

Volunteer Information

- Date of Birth
- Ethnicity
- Primary Language
- Secondary Language
- Disabilities
- Emergency Contact
- Emergency Contact Phone
- Volunteer Employment Information
 - Name of Employer
 - Position
 - Supervisor Name
 - Working Hours
 - Work Address 1
 - Work Address 2
 - Work City
 - Work State
 - Work Zipcode
 - Work Phone
 - Work Email
- Current status
- Date Sworn In
- Date Accepted
- Date Initial Training Completed
- Date Discharged
- Reason Discharged
- Case Supervisor
- Volunteer Preferences
 - Preferred Gender
 - Preferred Number of Children
 - Volunteer prefers NOT to work with this disability
 - Prefers NOT to work with this abusive situation
 - Preferred Geographic Area
 - Age From:
 - Age To:
- Case Notes/Hearing information
 - All efforts completed by Volunteers
 - All notes entered by Case Supervisors/GALs
 - All hearing information