



# Volunteer Application

CASA provides equal opportunities to all volunteers, without regard to sex, race, color, religious belief, national origin, age or disability, except where the disability is such that the volunteer cannot perform the duties and responsibilities required of him/her.

## Personal Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Home Address: \_\_\_\_\_ Apt. #: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County \_\_\_\_\_

DOB: \_\_\_\_\_ Social Security #: \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Ethnicity: \_\_\_\_\_ Gender:  Male  Female

Home Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Referred by:  flier  internet  newspaper  radio  TV  CASA Volunteer  Other

If referred by a CASA Volunteer, what is their name? \_\_\_\_\_

Have you ever volunteered for CASA in St. Joseph County, in any other county or state?  Yes  No

If yes, please list \_\_\_\_\_

## Educational History

Highest level of school completed: \_\_\_\_\_

Are you presently attending school?  Yes  No

Will you receive academic credit for your CASA volunteer work:  Yes  No

Do you speak a language other than English?  Yes  No

If yes, specify which language(s): \_\_\_\_\_

## Work History

(Please list your work history, both paid and volunteer. Start with your current occupation then list in reverse chronological order your employment for the last 7 years.)

Current Employer: \_\_\_\_\_ Position \_\_\_\_\_ Start Date: \_\_\_\_\_

Phone Number: \_\_\_\_\_ May we call you at work:  Yes  No

Previous Employer: \_\_\_\_\_ Position: \_\_\_\_\_ Employment Dates: \_\_\_\_\_

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Previous Employer: \_\_\_\_\_ Position: \_\_\_\_\_ Employment Dates: \_\_\_\_\_

## Availability

Are you willing to commit to at least eighteen months of volunteer service?  Yes  No

Do you drive?  Yes  No Do you have regular access to a vehicle? Yes  No

Driver's License #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Auto Insurance Company: \_\_\_\_\_

As a CASA volunteer you will be required to attend court hearings or other meetings for the children you represent.

Will you be able to arrange your schedule to attend these hearings and meetings? Yes  No

## Background

**If you answer yes to any of the following questions, please attach a sheet of paper with an explanation for each.**

1. Have you ever been arrested, charged, and/or convicted of a misdemeanor or felony?  
 Yes  No
2. Have you ever been or are you currently on parole or probation?  
 Yes  No
3. Have you ever been charged or convicted with DUI or reckless driving?  
 Yes  No
4. Have you ever been denied issuance of a license or had a license suspended or revoked?

Yes  No

5. Have you ever been the subject of a child abuse/neglect investigation by Child Protective Services?

Yes  No

6. Have you ever worked with children in foster care (personally or professionally) or with families who may have children in foster care?

Yes  No

7. Have you ever been investigated, arrested, charged, or convicted for any form of sexual misconduct?

Yes  No

8. Can you think of any reasons, past or present, why a judge might be reluctant for you to serve as a sworn officer of the court and as a Court Appointed Special Advocate?

Yes  No

### References

Please list three references and their addresses. You need to list people whom you have known for at least two (2) years, other than relatives, and preferably for whom you have worked in either a paid or volunteer capacity. **An email or mailing address is required for each reference. Please make your references aware that we will be contacting them.**

1. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Email Address: \_\_\_\_\_

2. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Email Address: \_\_\_\_\_

3. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**Essay Questions**

Please list your current and previous volunteer work.

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Why would you like to be a CASA volunteer and what do you believe makes you a suitable applicant?

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Briefly explain what role you believe society should play in protecting the rights of children and in helping families overcome hardships in order to remain living together as one unit.

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What experience or knowledge of children and families do you have that will assist you in determining what may be in a child's best interests? (ex. Parenting, childcare, etc.)

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Briefly describe any experience you have had with social service agencies as a staff person, foster parent, volunteer or client.

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Describe any strong interests, knowledge areas, hobbies or special skills that you could offer as a volunteer:

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What do you hope to get out of this volunteer experience?

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**Background Check**

Any applicant convicted of or having charges pending for a felony or misdemeanor involving a sex offense, child abuse or neglect or related acts that would post risks to children or to the CASA program's credibility is not eligible to be a CASA volunteer.

I \_\_\_\_\_, hereby affirm that all of the answers provided on my volunteer application are true. I hereby authorize the CASA program and any law enforcement agency they authorize, to investigate my background to determine my fitness as a potential volunteer. This may include but is not limited to: national (including NCIC and Triple I), state, and local criminal records check(s), urine drug screen, Department of Child Services background check, and motor vehicle check.

I understand that the information requested in this application will be used only for the purpose of determining my suitability as a CASA volunteer. Further, I understand that completion of training does not guarantee that I will be assigned a case. If I have successfully completed the training and have met all

other requirements, and it has been determined that I am a suitable volunteer, I understand that I will be expected to serve a minimum of eighteen months in the CASA program. If unforeseen circumstances prevent me from fulfilling this obligation, I will submit my written resignation to the program director with as much advance notice as possible. I am aware of the sensitive and confidential nature of the official documents, reports, and other material I will examine in my capacity as a CASA volunteer. I will discuss these matters only with those persons directly involved in the case or with those who will be consulted for their professional knowledge and expertise.

I also understand that if for any reason it becomes apparent that my activities are contrary to the policies, goals and/or philosophy or the CASA program and their ability to provide quality services to abused and neglected children, my services as a CASA volunteer will be terminated.

I submit the statements on this application are true, complete and correct to the best of my knowledge. I understand that falsification on this application can disqualify me from consideration or can result in dismissal at a later time.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**For Office Use Only:**

Date of interview: \_\_\_\_\_

Copy of driver's license: \_\_\_\_\_

Interview completed by: \_\_\_\_\_

Copy of auto insurance: \_\_\_\_\_

Date references mailed: \_\_\_\_\_

Oath of Confidentiality: \_\_\_\_\_

Received all references back: \_\_\_\_\_

Code of Ethics: \_\_\_\_\_

Date background check completed: \_\_\_\_\_

Statement of Commitment: \_\_\_\_\_

Date CPS check completed: \_\_\_\_\_

Date sworn in: \_\_\_\_\_

Date drug screen completed: \_\_\_\_\_

Entered in COMET: \_\_\_\_\_

Entered in QUEST: \_\_\_\_\_

Notes: \_\_\_\_\_

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