Applicant Name	

#### CARROLL-WHITE CASA PROGRAM

## **VOLUNTEER APPLICATION**

# PERSONAL INFORMATION: Full Name: Date of Birth: Address: Email: Home phone: Social Security No.: Cell phone: Business address: Business phone: \_\_\_\_\_ May we call you at work? Y/N Emergency Contact: Phone: Please list the name(s) of your child(ren): Name Date of Birth Please list other members of your household: (name and relationship) PAID/UNPAID WORK HISTORY Present Employer/Volunteer Supervisor: Address: Phone:

Applicant Name	
Job Title:	Full Time / Part Time
Dates of Employment: to _	
Previous Employer/Volunteer Supervisor:	
Address:	Phone:
Job Title:	Full Time / Part Time
Dates of Employment: to _	
Previous Employer/Volunteer Supervisor:	
Address:	Phone:
Job Title:	Full Time / Part Time
Dates of Employment:to _	
Please list any community organizations to whi held:  Have you ever worked with children? When an	
EDUCATION AND TRAINING	
	ajor/Minor
Name of High School and Year Graduated:	
College Diploma? Y / N M	ajor/Minor

Applicant Name			
Name of College and	d Years Attended:		
Other Educational/T	raining Programs Comp	leted:	
LEGAL HISTORY	7		
Have you ever been	arrested? Y/N		
If yes, please explain	n:		
Have you ever been	involved in a juvenile co	ourt case (as an adult	t or child)? Y/N
If yes, please explain	n:		
Have you ever been	the subject of a child ab	use investigation?	Y/N
If yes, please explain	n:		
RESIDENCE HIST	TORY:		
Please list your resid	lential history for the pas	st five (5) years:	
City	County	State	Years lived there

Applicant Name	!	

#### MOTIVATION AND LIFE HISTORY INFORMATION:

Please answer the following questions in paragraph form on a separate sheet of paper.

- 1. Briefly explain what attracted you to this program. Include a short summary about your interest in volunteering and how you hope to benefit from the volunteer experience.
- 2. Please explain your philosophy of parenting, including the rights and responsibilities of both parents and children.
- 3. Write a short autobiography (one or two paragraphs).

I,	my knowledge and belief. I hereby authorized of determine my fitness as a potential CASA in this application will be used only for the Appointed Special Advocate. Further, it is initial training, I will be expected to serve as long as the child/children to whom I ambeen circumstances prevent me from fulfilling
Signature	Date
Witness	_

Applicant Name

Any person who has a conviction or charges pending for a felony or misdemeanor involving a sex offense, violent act, child abuse or neglect, or related acts that would pose risks to children or to the credibility of the Carroll-White CASA program will not be accepted into the program. Any person who is found to have committed a misdemeanor or felony that is unrelated to or would not pose a risk to children and would not negatively impact the credibility of the Carroll County CASA program will be evaluated on a situational basis by the staff. Staff will consider the extent of rehabilitation since the misdemeanor or felony was committed, as well as other factors that may influence the decision to accept the applicant as a CASA volunteer. Staff will also consider the impact that the criminal record may have on the credibility of the prospective volunteer in court, and the resulting possible effect on the child. Volunteers must authorize Carroll-White CASA to secure a local/state/national criminal records check, child protective services check, and sex offender registry check.

Applicant Name	!	

#### PERSONAL REFERENCES

Please print names, addresses, and telephone numbers of individuals you have known for at least two (2) years. These should be people who know you well and who can address how you relate to children and the public in general, and how well you could fulfill the responsibilities of a CASA volunteer. Please do not include relatives. Carroll-White CASA will contact and may send a questionnaire to the people you name as references.

Name:	Relationship:
Address:	
Daytime Telephone:	Length of acquaintance:
Name:	Relationship:
Address:	
Daytime Telephone:	
Name:	Relationship:
Address:	
	Length of acquaintance:
Name:	Relationship:
Address:	
Daytime Telephone:	Length of acquaintance:

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### TRAINING AVAILABILITY

Initial training to be certified as a CASA volunteer is thirty (30) hours to include classroom sessions, independent study, and courtroom observation. Classes are scheduled in a manner to best suit the most persons desiring to take the class at any one time. Please indicate your availability by circling the sessions you **would** be available for a training session:

Mondays:	Morning	Afternoon	Evening
Tuesdays:	Morning	Afternoon	Evening
Wednesdays:	Morning	Afternoon	Evening
Thursdays:	Morning	Afternoon	Evening
Fridays:	Morning	Afternoon	Evening
Saturdays:	Morning	Afternoon	Evening
Sundays:	Morning	Afternoon	Evening

Please return completed application to:

Carroll-White CASA Program c/o Abigail Diener 102 S. Union St. PO Box 257 Delphi, IN 46923

Or you may scan and email your application to <a href="mailto:carrollwhitecasa@gmail.com">carrollwhitecasa@gmail.com</a>