

Name	Relationship	Age	Place of Employment
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Have you ever entered a treatment program relating to admitted incidents of child physical, emotional or sexual abuse that was **committed** by you? Yes No

DHHR HISTORY

An applicant having a pending DHHR investigation may be disqualified as a CASA volunteer. An applicant having a substantiated allegation of abuse or neglect will be disqualified as a CASA volunteer.

Have you ever been investigated by the Department of Health and Human Resources for abuse and/or neglect? Yes No.

If yes, please explain: _____

Have you personally experienced abuse or neglect as a child? Yes No

If yes, please explain what you have done to recover from it and how you believe it may effect how you work with children who have been abused.

CRIMINAL HISTORY

An applicant found to have been convicted of, or having charges pending for a felony or misdemeanor involving a sex offense, child abuse or neglect, or related acts that would pose risks to children or the CASA Program’s credibility **will not** be accepted as a CASA volunteer.

Applicants with other misdemeanor or felony charges or convictions that would **not** pose a risk to children or negatively impact the credibility of the CASA Program will be considered on a case by case basis considering the time passed since the incident and the level of rehabilitation.

Have you ever been arrested for a crime? Yes No

If yes, what was the charge? _____

Date of arrest/Disposition: _____ County: _____

CURRENT EMPLOYMENT

Current Employer _____

Address _____

City/State _____ Phone No. _____

May you be contacted at work? Yes No

Brief description of work _____

EMPLOYMENT HISTORY

Employer	Dates Employed	Supervisors Name	Telephone Number

EDUCATION (Check highest completed)

High School: 9 10 11 12 College: 1 2 3 4 Graduate: 1 2 3 4

Major: _____

Degree: _____

Are you presently enrolled in school? Yes ___ No ___

If yes, name of school and course of study: _____

Will you receive academic credit for your volunteer work? ___ Yes ___ No

Do you speak a foreign language? ___ Yes ___ No

If yes, which language (s) _____

SKILLS AND INTERESTS

Do you have experience and or training in any of the following? (please check all that apply)

<input type="checkbox"/>	Medicine	<input type="checkbox"/>	Education
<input type="checkbox"/>	Mental Health	<input type="checkbox"/>	Criminology
<input type="checkbox"/>	Counseling	<input type="checkbox"/>	Law Enforcement
<input type="checkbox"/>	Psychology	<input type="checkbox"/>	Advertising or Public Relations
<input type="checkbox"/>	Child Development	<input type="checkbox"/>	News/Media
<input type="checkbox"/>	Writing	<input type="checkbox"/>	Child Care
<input type="checkbox"/>	Child Welfare	<input type="checkbox"/>	Public Speaking
<input type="checkbox"/>	Drug/Alcohol Treatment	<input type="checkbox"/>	Social Work
<input type="checkbox"/>	Art or Graphics	<input type="checkbox"/>	Practice of Law
<input type="checkbox"/>	Other	<input type="checkbox"/>	

Briefly describe any items that you checked on the Skills and Interests list:

AVAILABILITY

When would you be available for volunteer service and/or training? Check times:

	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.
Morning							
Afternoon							
Evening							

Are you willing to commit to one year of volunteer service? ____ Yes ____ No

How many hours per week are you available? _____

As a CASA Volunteer you will be required to attend court hearings for the children you represent.

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

Do you drive? ____ Yes ____ No Do you have access to a car? ____ Yes ____ No

Driver's License Number: State ____ Number _____ (Please provide a copy of your license.)

REFERENCES

Please provide three names to be used as Professional References. You should know these individuals for at least one year. Two of the references you should know professionally through your work, volunteer service, or academics. One may be a personal reference, excluding a family member. Completed Written Reference Forms must be returned to the CASA office PRIOR to being sworn in.

Three References:

Name: _____

Address: _____

Phone: _____ Relationship: _____

Name: _____

Address: _____

Phone: _____ Relationship: _____

Name: _____

Address: _____

Phone: _____ Relationship: _____

PLEASE WRITE A SHORT AUTOBIOGRAPHY (1 page or less).