

NORTHERN HILLS AREA CASA PROGRAM

VOLUNTEER APPLICATION



(Please Print)

Name: _____

Address: _____

Telephone #'s: home: _____ work: _____ cell: _____ fax: _____

Are you employed? yes no If yes: ___ full-time ___ part-time

Place of employment: _____ Position: _____

Do you have a computer available to you? _____ Do you have access to email? _____

Your **home** email address: _____ **Work** email address: _____

If needed, may we....call you at work? ___ fax you at work? ___ email you at work? ___

How long have you lived at your current residence? _____

Date of Birth: _____ Marital Status: _____

If presently married, your spouse's name and occupation:

Name: _____ Occupation: _____

Do you have children? _____ If so, what are their ages: _____

Do you have a valid driver's license? ___ Do you have an automobile available to you? _____

Current automobile liability insurance carrier: _____

Education (circle the highest level completed)

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

Major: _____ Degree: _____

Do you have training or experience in any of the following:

- | | |
|--|---|
| <input type="checkbox"/> Computer (IBM or Mac) | <input type="checkbox"/> Counseling/Mental Health |
| <input type="checkbox"/> Education/Child Development | <input type="checkbox"/> Child Care |
| <input type="checkbox"/> Writing for the Media | <input type="checkbox"/> Foster Care |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Criminology/Law Enforcement |
| <input type="checkbox"/> Art or Graphic Design | <input type="checkbox"/> Drug or Alcohol Abuse Programs |
| <input type="checkbox"/> Event Planning | <input type="checkbox"/> Clerical |

List your community activities and memberships in clubs, religious and professional groups and circle your present membership status:

_____ current or former
 _____ current or former
 _____ current or former

List any previous work or volunteer history that you feel has helped to prepare you for your work as an advocate:

Have you ever been convicted of a crime? No _____ Yes _____ When (year) _____

If yes, on what charge? _____

Are you prepared to complete 36 hours of pre-service training and a minimum of 12 hours per year of in-service training?

Yes _____ No _____

Would your schedule permit you to attend occasional court hearings or meetings during the day? _____

What do you feel are the strengths or experiences that you bring to this program _____

Please describe any personal or professional experiences you have had which involved child abuse or neglect, the Department of Social Services, the Juvenile Court system, foster care, or other agencies offering services to children?

Please write a brief statement explaining how you learned about the CASA program and why you have chosen to work as a volunteer. Please use an additional sheet of paper and attach it to this application.

PERSONAL REFERENCES: (Preferably not relatives) At least one reference should be from someone other than a friend or co-worker, i.e. teacher, professional colleague, member of an organization you belong to, etc.

1) Name: _____ Relationship: _____

Address: _____ Phone: _____

City: _____ ST _____ ZIP _____

2) Name: _____ Relationship: _____

Address: _____ Phone: _____

City: _____ ST _____ ZIP _____

3) Name: _____ Relationship: _____

Address: _____ Phone: _____

City: _____ ST _____ ZIP _____

In case of an emergency, who should we contact?

Name: _____

Relationship: _____

Daytime phone: _____ Evening phone: _____