

CASA – Cass County, Michigan

Volunteer Application

PERSONAL INFORMATION:

Name: _____
Last Name First Name M.I.

Address: _____
Street City State Zip

Telephone: _____
Home Work - May we call you at work: _____
Cell Message

E-Mail: _____

Sex: M F Birth Date: _____

Marital Status: Married Single Widowed Divorced

Spouse's Name: _____

Children's Names & Ages: _____

EMPLOYMENT INFORMATION:

Current Employer: _____

Business Address: _____

Supervisor's Name & Phone Number: _____

Your Normal Days & Hours Of Work: _____
Example: Mon-Fri, 8am – 5pm

If it is necessary to appear in court or fulfill other CASA obligations during your normal work hours, will you be able to do so? _____

Please give a brief description of your job responsibilities: _____

AVAILABILITY:

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

How many hours per week are you available? _____

What days and hours of the 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

VOLUNTEER EXPERIENCE:

1. Agency Name & Address: _____

Dates: _____

To

From

Responsibilities:

2. Agency Name & Address: _____

Dates: _____

To

From

Responsibilities:

EDUCATIONAL INFORMATION:

Highest level of education achieved? _____

Did you graduate? _____ Area of study: _____

Professional licenses, registrations, and/or certifications:

Type

State issued

Exp. Date

No.

PERSONAL & BUSINESS REFERENCES (Please do not use relatives):

Name: _____ Relationship: _____

Address: _____

Street

City

State

Zip

Telephone: _____

Home

Business

Name: _____ Relationship: _____

Address: _____
Street City State Zip

Telephone: _____
Home Business

Name: _____ Relationship: _____

Address: _____
Street City State Zip

Telephone: _____
Home Business

OTHER EXPERIENCE:

Have you had any personal experiences with any of the following?

Department of Public Welfare – Child Protection Services: _____

Juvenile Court: _____

Foster Care: _____

Any other agency offering services to children: _____

Have you ever been convicted of any offense other than a minor traffic violation? _____

If yes, please explain: _____

How did you find out about the CASA program? _____

Referred by: _____

Other special training, skills, experiences, or education, which increases your value to the CASA program: _____

If chosen as a CASA volunteer, when would you be available for training sessions?

MORNINGS

AFTERNOONS

EVENINGS

WEEKENDS

(circle the best time)

Please write a brief statement about why you would like to be a CASA volunteers and what you expect from the CASA program (attach additional pages, if necessary).

BACKGROUND CHECK:

Any 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 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 Cass County CASA, Inc. and any law enforcement agency they authorize, to investigate my background to determine my fitness as a potential volunteer.

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 (18) months in the CASA program. If unforeseen circumstances prevent me from fulfilling this obligation, I will submit my written resignation to the volunteer coordinator or executive 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 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 of the CASA program, and their desire 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 of Applicant

Date