



Volunteer Application

Court Appointed Special Advocates Amador and Calaveras Counties

- Main Office: 601 Court Street, Suite 210, Jackson, CA 95642
Amador Phone: 209-257-1980 ext. 108
- Calaveras Office: 400 Government Center Drive, San Andreas, CA 95249
Calaveras Phone: 209-754-9816

Email: froberts@nexusyfs.org

The information on this form will help us assess your qualifications to serve as a volunteer Court Appointed Special Advocate (CASA). Please read the directions carefully and complete all sections of the application as thoroughly as possible. If your application is accepted, you will be scheduled for a screening interview.

Please note:

Being involved in any of the following actions could preclude you from consideration in the CASA program:

1. Arrest and/or conviction of any crime against a child, violent felony, and/or sex crimes.
2. Undergoing prosecution of any kind at the time of the application.
3. Conviction of a crime within the past five years.
4. Any DUI conviction, DMV two-point violation, and/or more than two points on your current DMV record.
5. CPS involvement within your family (other than foster parent).
6. Being paid or reimbursed to provide a service to children in the child welfare or juvenile justice system.
7. Refusal to sign an Authorization for Release of Information regarding background and DMV checks.

PERSONAL DATA

Last Name:		First Name:		Middle Name:	
Maiden/Prior Name/AKA:			I prefer to be called:		
Date of Birth:		I identify my gender as:			
Home Address:					
City/State/Zip:			Home Phone:		
Mailing Address:			Cell Phone:		
City/State/Zip:			Work Phone:		
Email Address:			Other Phone:		
Emergency Contact:			Emergency Phone:		

VEHICLE INFORMATION

Do you have a valid CA driver's license?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have reliable transportation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Driver's license #:		Expiration Date:	
Do you have a valid vehicle insurance?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Can you supply proof of your insurance?	<input type="checkbox"/> Yes <input type="checkbox"/> No

How did you hear about our program?

EDUCATION

Circle OR Type last grade completed:																				
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
(Grade School)								(High School)				(College)				(Graduate)				(Beyond)
NAME AND LOCATION OF LAST SCHOOL ATTENDED														FROM (Mo./Yr.)	TO (Mo./Yr.)	Diploma / Degree received?				
																Yes <input type="checkbox"/> No <input type="checkbox"/>				

EMPLOYMENT HISTORY

(include Permanent, Part-time, Cooperative, Summer and any prior U.S. Military Services)					
EMPLOYER NAME, ADDRESS AND TELEPHONE NUMBER (most recent first)	HOURS/ WEEK	FROM (Mo./Yr.)	TO (Mo./Yr.)	JOB TITLE / NATURE OF WORK & NAME OF SUPERVISOR	REASON FOR LEAVING
MAY WE CONTACT YOU AT WORK? YES <input type="checkbox"/> NO <input type="checkbox"/>					

VOLUNTEER EXPERIENCE

ORGANIZATION NAME, ADDRESS AND TELEPHONE NUMBER (most recent first)	HOURS/ WEEK	FROM (Mo./Yr.)	TO (Mo./Yr.)	POSITION TITLE / NATURE OF WORK & NAME OF SUPERVISOR	REASON FOR LEAVING

BACKGROUND INFORMATION

Have you or are you:		
1. Been arrested and/or convicted of any crime against a child?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Been arrested and/or convicted of a violent felony?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Been arrested and/or convicted of a sexual crime?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
*If you answered <i>Yes to 1, 2 or 3</i> above, are you able to produce a written declaration of a <i>Finding of Factual Innocence</i> as described in the California Penal Code, Section 851.8 et seq	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. Currently undergoing prosecution of any kind?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5. Been convicted of a DUI?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6. Been found guilty of a two-point DMV violation and/or have more than two points on your current DMV record?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7. Had Child Protective Services involvement in your family (not including being a foster parent)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
8. Have you been paid or reimbursed to provide a service to children in the child welfare or juvenile justice system?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
9. Have you ever been arrested or convicted of any crime not mentioned above?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10. Have you ever had anyone make allegations of child abuse against you or anyone in your household?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

POLICY

CASAs volunteer ten to twelve hours per month, including seeing their children at least once a week. It is flexible to meet people's schedules, but it is a firm commitment. The most common reasons that people fail to keep their commitments are: <ul style="list-style-type: none"> • Moving • Job Change • Family Care Needs • Emotional Issues • Health Issues Do you foresee any of these occurring for you in the next 12- 18 months?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Being a CASA requires a 12-18 month commitment to a child as well as the court. This commitment is taken seriously and is considered both a legal and moral obligation. Can you make this commitment?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
CASAs are strictly prohibited from imposing their personal spiritual, religious, and/or political beliefs onto their CASA child. Can you commit to this policy?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
CASAs have strict guidelines about the nature of your relationship with your CASA child. You are not allowed to take them to your home or office. You are also not allowed to introduce them to any of your friends and/or family. Can you commit to this policy?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

REFERENCES

Please list five people that we can contact for references. **One must be a current or former supervisor or co-worker.** Teachers, ministers, volunteer supervisors, or similar people may be used in place of an employer if necessary. ***Please do not list relatives.*** Because we will be mailing/emailing a questionnaire to your references, please provide complete information and let them know to expect mail from CASA of Amador/Calaveras soon. If the person would prefer to fill out the form online, please include their email address.

1. Name		Phone
Address		
City/State/Zip	Email:	
Relationship		Years Known
2. Name		Phone
Address		
City/State/Zip	Email:	
Relationship		Years Known
3. Name		Phone
Address		
City/State/Zip	Email:	
Relationship		Years Known
4. Name		Phone
Address		
City/State/Zip	Email:	
Relationship		Years Known
5. Name		Phone
Address		
City/State/Zip	Email:	
Relationship		Years Known

AVAILABILITY

Part of your responsibility as a CASA volunteer will be to appear in court (approximately three to four times per year) on your assigned case(s). Do you foresee any difficulties with appearing in court during these times? Court hearings typically fall on Tuesdays from 8:30 a.m. to 11:30 a.m. or Thursdays from 1:30 p.m. to 4:30 p.m. The dates are usually known several weeks in advance.	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please explain:	

WRITING

Please answer the following questions. You may use extra pages if necessary.

Describe a time when you felt strongly about a topic/person/issue about which you have since changed your mind. How did that happen?

Describe a time in which you had to be courageous to do something to benefit someone else.

How do you deal with stress? Who is your support system?

AGREEMENT

Please read and initial each agreement.

As an applicant to become a CASA volunteer:

No individual will be rejected as a CASA volunteer based on their race, color, ancestry, national origin, religion, sex, disability, age, genetic information, marital status, sexual orientation, gender identity and gender expression, AIDS/HIV, medical condition, political affiliation, military or veteran status, and status as a victim of domestic violence. _____

I understand that graduation from this program depends upon successful completion of CASA pre-service training, a satisfactory background check including: Live Scan fingerprint clearance, a DMV driver report, a Social Security check, a sex offender registry check, submission of any additionally requested information, and interview by CASA Staff member. _____

I understand that after successful completion of pre-service training, I will be expected to serve approximately ten to twelve hours per month for at least twelve to eighteen months as a Court Appointed Special Advocate. This commitment could include but is not limited to visiting the child/ren on a regular basis, writing court reports, advocating for the child/ren, completing twelve hours of continuing education each year, and appearing in court. _____

I will participate in on-going supervision and training meetings, cooperate fully with staff, and adhere to all agency-approved rules and regulations. If unforeseen circumstances prevent me from fulfilling this obligation, I will give the Program advance notice in writing. _____

I understand that if my CASA case assignment requires transporting children or driving while conducting CASA business, I will provide the CASA program with copies of my current driver’s license and proof of personal automobile insurance that meets the minimum state personal automobile insurance requirements. Additionally, I consent to the CASA program receiving a California Department of Motor Vehicles driving record report annually. _____

In addition to the personal liability insurance that CASA of Amador/Calaveras County carries for its advocates and board, volunteers have limited protection by immunity clauses in state law. However, I understand that I can still be personally responsible if someone is harmed as the result of my willful failing to follow program rules, my abusing a child, my misusing an automobile, my negligence, or my exercising poor judgment. _____

I understand that when I leave the program, I will return any case files, I.D. Badge, business cards, case notes, and any and all other CASA materials obtained while serving as a volunteer with the program. All materials must be returned within seven days of separation from the program. _____

Please Note:

The following questions are for matching you with potential cases. They have no bearing on your application and are not guarantee of the cases on which you would work.

With what age children do you prefer to work?	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-11	<input type="checkbox"/> 12-18	<input type="checkbox"/> 18-21
Are you willing to accept a sibling group assignment?	<input type="checkbox"/> Yes		<input type="checkbox"/> No	

AFFIRMATION AND RELEASE

I hereby affirm that all of the answers provided are true. I hereby authorize CASA of Amador/Calaveras County to investigate my background to determine my fitness as a potential volunteer. Falsifying and/or knowingly misrepresenting any information in this application are grounds for denying the applicant or dismissal of the volunteer. I understand that the screening process includes, but is not limited to:

Live Scan Fingerprinting
Social Security Check

DMV Driver Report
Registered Sex Offender Database Check

I understand that the information requested in this application will be used only for the purpose of determining suitability as a CASA volunteer. I understand that after successful completion of my training and acceptance as an advocate, I will be expected to serve a minimum of twelve to eighteen months in the CASA program. If unforeseen circumstances prevent me from fulfilling this obligation, I will submit my written resignation to my CASA supervisor as soon as possible.

I understand that if I am unable to complete all mandatory training sessions, I will have to complete all missed sessions at either the next scheduled training or arrange individual training with CASA staff. I understand that I will not be able to serve as a volunteer until these sessions are completed as well as any additional requirements that CASA staff may deem necessary.

I am aware of the sensitive and confidential nature of the documents, discussions, and other material I will examine in my capacity as a volunteer advocate. I will discuss these matters only with those directly involved in the case.

I understand that I am not allowed to introduce my CASA child to any of my friends, co-workers, or family.

I have read the above waiver and release statement and fully understand what rights I am waiving by signing this document.

Signature

Date

Full Name (please print)

Social Security Number

Previous Names (aka, maiden, etc)

Date of Birth

Driver's License Number/Expiration

Current Address

Previous Addresses for the past five years

STATISTICAL DATA AND PREFERENCES

Please Note:

The following two questions are for statistical purposes. They have no bearing on your application. You may opt to not answer one or both of them.

What is your Ethnic Identity? _____

What languages do you speak? _____

