



Court Appointed Special Advocate Volunteer Application

Purpose and Role of the CASA Volunteer

Thank you for your interest in working as a volunteer with CASA for Kids, Inc. Barry, Eaton & Ingham (CASA). CASA volunteers are trained community volunteers, appointed by a judge, to speak up for abused and neglected children in court. They work alongside attorneys and social workers as appointed Officers of the court. When a CASA volunteer is appointed to a case, he or she is responsible for taking the time to find out as much as possible about that child or sibling group. CASA volunteers search for information, review records, interview parents, talk to teachers, neighbors and most importantly- listen to the child.

CASA volunteers are the “eyes and ears of the court”. A CASA’s recommendations occur independently of any agency, being predicated solely upon the child’s best interests. CASA volunteers are assigned to one case at a time, and remain committed to that case until the child/ren are safely re-unified with the parents or placed permanently outside the home. It is a CASA’s mandate to provide an independent assessment of all aspects of a child/ren’s life and make written recommendations to the court based on each child’s best interests. The CASA does not provide services, but assembles and provides information that, in the opinion of the CASA volunteer, describes needed services. The case assignment is for the duration of the legal court case, which averages 12-18 months, and the volunteer time commitment averages approximately 10-12 hours per month.

CASA volunteers work closely with court employees and paid staff of the CASA program and are an integral part of the program. In every role, volunteers’ function under the same expectations as paid staff in terms of work attendance, dependability, adherence to established work procedures and compliance with professional standards of conduct. In turn, volunteers are assigned meaningful work. Acting as a CASA volunteer is a very rewarding experience.

CASA is an equal opportunity organization. It is CASA’s policy to provide equal opportunity to all applicants based on qualifications and abilities without regard to race, color, sex, age, sexual orientation, marital status, parental status, religion, disability, national origin, citizenship, veteran status, political affiliation, or membership in any labor organization. CASA seeks to engage individuals who are representative of the populations served.

The questions in this application are asked for the purpose of preliminary assessment of your qualifications as a CASA volunteer. Some of the questions are designed to evaluate your qualifications as a volunteer; others address any previous law violations or treatment history. The final decision will be made after a personal interview. While information requested is not an automatic barrier to final acceptance, it will be assessed and discussed with you regarding its relevance to your work as a CASA volunteer. The information is requested to expedite the application process. If you have any questions about completing the application, please contact the Director or Advocate Supervisors of the CASA program.

Keep the first page and return this application to:

CASA for Kids, Inc.

Eaton County:

1045 Independence Blvd., Charlotte, MI 48813
Phone: 517.543.7500 ext. 1647
Email: jennapershey@casaforkidsinc.org

Ingham County:

3303 W Saginaw St. Ste-B2, Lansing, MI 48917
Phone: 517.331.9316
Email: amandagerding@casaforkidsinc.org

Barry County:

231 S. Broadway, Hastings, MI 49058
Phone: 269.818.5868
Email: michalevann@casaforkidsinc.org



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PLEASE TYPE OR WRITE LEGIBLY USING BLACK INK. COMPLETE ALL PAGES OF THE APPLICATION. THANK YOU!

Background Information

1. Name: _____
(Last) (First) (Middle) (Maiden)
 2. Address: _____
City, State, and Zip Code: _____
 3. Home Telephone: _____ Best Time to Call: _____
 4. Is it ok to call at work? Yes No Work Telephone: _____
 5. E-mail: _____
 6. Are you 21 years old or older? Yes No Social Security #: _____
 7. In case of an emergency during my volunteer hours, notify: _____
Phone: _____ Relationship: _____
 8. Have you lived in a state other than Michigan in the past seven (7) years? Yes No
If yes, where: _____
 9. Education (Please list school/college name and degree.)
High School: _____ Graduated Yes No
College: _____ Graduated Yes No
Other: _____ Graduated Yes No
Primary Language _____ Secondary Language _____
-

10. Employment: (List 3 employers, most recent first)

Employer	Position/job description	Dates Employed
_____	_____	_____
_____	_____	_____
_____	_____	_____

11. Volunteer Experiences:

Organization/Business	Position/job description	Dates Volunteered
_____	_____	_____
_____	_____	_____
_____	_____	_____

12. How did you learn about the CASA program?

13. Have you ever applied to a CASA Program? _____ If yes, what County/State? _____

14. Why do you want to volunteer? _____

15. Please list any strong interests, knowledge areas, hobbies or special skills that you could offer as a volunteer.

16. Do you have any training or experience in any of the following: (please circle)

- | | | |
|-----------------|-------------------|--------------------------------|
| Medicine | Education | Mental Health |
| Criminology | Counseling | Law Enforcement |
| Psychology | New Media | Advertising/Pub. Relations |
| Writing | Child Development | Child Welfare |
| Public Speaking | Child Care | Drug/Alcohol Abuse Programs |
| Art/Graphics | Social Work | Computer/software applications |

17. What experience or knowledge of children and families (i.e. parenting experience, child care experience, education or work experience) do you have to assist you in determining what may be in a child's best interest?

18. Have you any experience with social service agencies as a staff person, foster parent, volunteer, or client? If yes, please describe.

19. Have you had any experience with the juvenile or family court system? If yes, please describe.

20. Have you had any involvement with human services issues such as abuse, neglect, chemical dependency, developmental disabilities, mental health issues, or traumatic physical illness? If yes, please describe.

21. In your opinion, how could the system do a better job to protect children?

22. How many total hours per week are you available to volunteer? _____

Mon	AM	___	PM	___	Eve	___	Fri	AM	___	PM	___	Eve	___
Tue	AM	___	PM	___	Eve	___	Sat	AM	___	PM	___	Eve	___
Wed	AM	___	PM	___	Eve	___	Sun	AM	___	PM	___	Eve	___
Thur	AM	___	PM	___	Eve	___							

23. As a volunteer you are required to visit the child(ren) at their placement. Would you have the use of a car with the proper insurance? Yes No

24. Are you a current abuser of drugs and/or alcohol? Yes No

If yes, please explain. _____

25. Were you abused or neglected as a child? Yes No

26. Have you ever been accused of abusing or neglecting a child? Yes No

Criminal Record

CASA completes criminal background checks and Central Registry Clearances. The information requested in this section is essential for the record check and is required in order to be accepted into the program. If you choose to withhold this information, a final decision on your application cannot be made. Applicants with a conviction or 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 are ineligible. Volunteers are obligated to report changes in their criminal record.

27. Have you ever been convicted of a law violation other than a minor traffic offense? Yes No

If yes, what was the offense(s)? _____

Date(s) Convicted: _____

End of probation, parole or court jurisdiction: _____

28. Please list any additional information you feel would be helpful in assessing your application.

Acknowledgment

I declare that all of the preceding information is true and correct to the best of my knowledge. I understand that any false or misleading information given by me can disqualify me from consideration, or result in dismissal at a later time. I am required to sign releases for complete criminal background screens and a child abuse central registry clearance. Applicants who refuse to sign required releases for background checks and the central registry clearance are ineligible. I understand that convictions of or charges pending for felonies or misdemeanors involving sexual conduct, child abuse or neglect, or related acts that would pose risks to children or the CASA program’s credibility will disqualify me from consideration or result in separation at a later time. I understand that Court Appointed Special Advocate is an at-will position.

Signature

Date

Complete attached Personal Reference and Authority to Release Information forms and return with application.

References

Please list three personal references that can attest to your character skills and dependability. One reference should be a coworker, if employed. No reference can be related. (Other examples: minister, teacher, etc.) References will be contacted.

1. Name: _____

Relationship: _____

Address: _____

City: _____ State _____ Zip Code _____

Phone: Work (_____) _____ Home(_____) _____

Email: _____

2. Name: _____

Relationship: _____

Address: _____

City: _____ State _____ Zip Code _____

Phone: Work (_____) _____ Home(_____) _____

Email: _____

3. Name: _____

Relationship: _____

Address: _____

City: _____ State _____ Zip Code _____

Phone: Work (_____) _____ Home (_____) _____

Email: _____

Applicant Signature & Date

*** Please attach any additional information you want to submit ***



Authority to Release Information

The information requested below is essential to conduct record checks. You are not legally required to supply this information. If you choose to withhold this information, a final decision on your application cannot be made.

Full Name: _____ Date of Birth: ____ - ____ - ____

Social Security # _____

List any other name(s) by which you have ever been known (alias/maiden):

Operator License Number: _____ State issued: _____

Gender: _____ Race: (optional) _____

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

If yes, what was the offense? _____

State and County of the conviction: _____

Date convicted: _____ End of probation, parole or court jurisdiction? _____

Have you ever been involved in a Guardianship? _____

If yes, in which County? _____

I hereby give my permission for the CASA for Kids, Inc., Barry, Eaton, or Ingham Courts, and the Department of Health and Human Services to conduct a routine criminal record check, a Central Child Abuse Registry check, a driving record check, and to obtain other reference information for the purpose of assessing my application. I also give my permission to these same agencies to conduct annual criminal checks, Central Child Abuse Registry and driving records checks. I execute this release with the full knowledge and understanding that the information obtained about me is for official use of the CASA for Kids program.

Signature

Date

Print Name Rv. 8.17.12, 1.31.15