

## **VOLUNTEER APPLICATION FORM**

Last name	First name	Middle				
Home address		Apt				
City	State	ZIP				
County	Social Security numb	oer				
Home phone number	Work phone number					
Employment status O Full time O	Part time O Student O Not employed	O Retired				
Place of Employment	tLength of Employment					
Position						
E-mail address						
Emergency phone	Emergency contact					
Sex O Female O Male O Other	Date of birth					
Race (34) OAfrican-American O Asia	an-American O Caucasian O Latino O Native	e American O Other				
	hool completed) O Some High school O Post-graduate O Other	O GED O High school				
What is your primary Language? (15)	OEnglish O Spanish O French O	American Sign Language				
O Other						
Do you speak another/secondary Lang	guage? (15) O Spanish O French O Amer	ican Sign Language				
<b>O</b> Other						
Referred by (30) O Flier O Friend O O Volunteer referral agency O Other	Internet O Local newspaper O Local radio C Unknown	O National media O NCASAA				
Do you have a valid Georgia drive	er's license? O Yes O No					
Do you have regular access to a c	ar? O Yes O No					
Have you ever worked for the juve	enile court? O Yes O No					
Have you ever worked for the Dep foster parent) O Yes O No	partment of Family and Children Services	? (Include service as a				

Please list any volunteer experience and length of service
Please list Skills and Interests
Please list any other experience, education or training related to dependent children and families.
Have you ever been convicted of any violation of law other than minor traffic violations? (A conviction does not necessarily disqualify you from the volunteer program) O Yes O No
Have you sought treatment for or are you currently in treatment for a mental health problem? ○ Yes ○ No
Have you or your partner ever had a case with, or investigation performed by, the Department of Family and Children Services? O Yes O No (If yes, by signing this application you are providing consent for the CASA office to contact DFCS regarding the above mentioned case. Please explain.
Can you think of any reason why a judge might be reluctant for you to serve as a CASA Volunteer?  O Yes O No
Children's Voice: CASA, Inc. reserves the right to make any checks deemed appropriate as to the suitability of anyone responsible for this confidential work. All information obtained will be held in the strictest confidence.  The program rejects 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.
(Applicant's Signature)
REFERENCES
Please list two personal references of people who know you well (only one from a relative) and two professional references preferably for whom you have worked in either a paid or volunteer capacity:
Name
State Zin Code Relationship

Email		<del></del>			
NameAddress	Phone Numbe	r (H) C	ity	_(W)	
State Zip Code Email	Relationship_				
Name	Phone Numbe	r (H)	:4	_(W)	
State Zip Code Email_	Phone Numbe	C			
Name	Phone Numbe	r (H)	itv	_(W)	
State Zip Code	Relationship_				
services as a Court Appo	position description and inted Special Advocate.	Ū	·	ate	ш опег ту
THIS PART TO BE FILLED	OUT BY CASA STAFF		5.		
Criminal background che	ck with (05): O Child Abus	e Registry O CF	PS OF	Bl O Local O	State
O Other					
Date checked		Results			
Volunteer Type (27) O Vo	lunteer O Attorney	O Staff	O Par	t-time Staff	O Other
Volunteer Status (31) O A	pplication Accepted O Ass	signed to Case A	vailable	O Assigned to	0
Case Not Available O	In Training O Inquiry O	Never Trained O	On Leave	e O Other	
	Not Assigned to Case – Availa O Yes O No	ble			