



Volunteer Application

Date _____

(Please Print)

Name _____
Last First Middle Initial

Address _____

Telephone #: (h) _____ (w) _____

E-mail address: _____

May we call you at work? Yes__ No__ Social Security # _____

How long have you lived in Kentucky? _____

Date of Birth _____ Place of Birth _____

Marital Status _____

If presently married, give husband's/ wife's name and occupation:

Name _____ Occupation _____

Children:

Name	Date of Birth	Gender
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Other Members of Household:

Name Relationship

Name Relationship

Do you drive? Yes___ No___ Driver's license number_____

Exp. Date_____ Name of Insurer_____

Do you have an automobile available to you? Yes___ No___

What is your current health status? _____

EDUCATION (circle highest completed)

High School: 9 10 11 12

College: 1 2 3 4

Graduate: 1 2 3 4

Major_____ Degree_____

Are you presently enrolled in school? Yes___ No___

If yes, name of school and course of study

WORK/VOLUNTEER HISTORY (Use another sheet if necessary)

1. Name and Address of present or last employer or volunteer project FT PT

Dates_____ Supervisor's Name_____

Brief Description of Work_____

2. Name and Address of present or last employer or volunteer project FT PT

Dates_____ Supervisor's Name_____

Brief Description of Work_____

3. Name and Address of present or last employer or volunteer project FT PT

Dates_____ Supervisor's Name_____

Brief Description of Work_____

List any other current community activities. _____

Languages Spoken_____

Hobbies/ Special Interests_____

When would you be available for volunteer service? Check times:

MON__TUE__WED__THUR__FRI__SAT__SUN__

Morning__ Afternoon__ Evening__

Approx. time you can contribute weekly as a CASA volunteer? _____

Are you aware that you will be required to complete basic training? _____

Will you be willing to participate in ongoing training and court appearances? _____

Can you see yourself visiting with a family in their home or with an institutionalized child? _____

What do you feel are the strengths you bring to this program?

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

__Medicine

__Mental Health

__Criminology

__Working with children

__Counseling

__Public Speaking

__Law Enforcement

__Child Welfare

__Psychology

__Art or Graphics

__Advertising, PR, or News Media

__Social Work

__Drug or Alcohol Programs

__ Child Development

If you answered yes, please describe _____

Have you ever been arrested for a crime? Yes__ No__

If yes, what charge? _____

Date of Arrest/Disp. _____ Where? _____

Can you think of any reason why Judge Bramlage might be reluctant to appoint you to a case? Yes__ No__

If yes, Why? _____

Anyone 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 will be rejected. Applicants with other felonies or misdemeanors will be evaluated with regard to the nature of the offense and its impact on the program's credibility.

How did you learn about the CASA Program? _____

PERSONAL REFERENCES (References must be unrelated to you by blood or marriage. If employed, one reference from employer)

1. Name _____

Address _____

Telephone # _____ Relationship _____

2. Name _____

Address _____

Telephone # _____ Relationship _____

3. Name _____

Address _____

Telephone # _____ Relationship _____

In case of emergency, contact _____

Telephone # _____

What additional information do you need about CASA?

Please write a brief statement about why you want to be a CASA on the back of page 1.

AFFIRMATION AND RELEASE

I, _____, hereby affirm that all of the answers provided on my volunteer application are true. I hereby authorize the Boone County CASA Program 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 suitability as a CASA volunteer. Further, I understand that after the successful completion of my training, I will be expected to serve a minimum of one year in the CASA program. If unforeseen circumstances prevent me from fulfilling this obligation, I will submit my written resignation to the program 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 people directly involved in the case or professionals consulted for their knowledge and expertise.

Name (please print) _____

Signature _____