



LACKAWANNA COUNTY CASA
Court Appointed Special Advocates
FOR CHILDREN

Facilitated by
the Advocacy
Alliance

Volunteer Application

The information on this form will help us assess your qualifications to serve as a CASA volunteer. Please read the directions carefully and complete **all** sections of the form. Information provided by you is confidential. If your application is accepted, CASA Program staff will contact you to schedule a personal interview.

Name: _____ Date: _____

Date of Birth: _____ Social Security Number: _____ Gender: _____

Any Previous Names (including Maiden): _____

Address: _____

(Street)

(City)

(State)

(Zip Code)

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

Cell Phone Number: _____ E-mail Address: _____

Is your primary interest in the CASA Program becoming a volunteer? _____

- If your primary interest in the CASA Program is **not** in becoming a volunteer, or
- You are not 21 years of age or older, or
- You cannot commit to the time requirements of the program right now, would you be interested in any of these other areas to support the CASA Program?

Special Events _____

Office Assistance _____

Do you have any special talents you would like to share (computer knowledge, media contacts, corporate sponsors, decorating for receptions, etc.)?

How long have you lived in Pennsylvania? _____

If you have resided in another state(s), please list previous addresses:

Name of Spouse/Significant Other: _____

In case of an emergency, call: _____
(Name) (Phone) (Relationship)

Do you drive? _____ Do you have access to a car? _____

Driver's License Number: _____ Car Insurance Company: _____

Are you currently Employed? _____ Your position/job title: _____

Employer's Name and Address: _____

Employer's Phone Number: _____

Because of the need for a volunteer to attend court hearing during business hours, is your work/employer flexible to meet this requirement? Yes No If yes, please explain:

Please list any Education or Special Training:

Do you speak any languages other than English? _____ If yes, please list: _____

In the past year, have you had any of the following?

1. PA. Child Abuse History Clearance? _____ Date: _____
2. PA State Police Request for Criminal Record Check? _____ Date: _____
3. FBI Check? _____ Date: _____

Have you **ever** been convicted of a crime (misdemeanor and/or felonies)? _____

If yes, what crime: _____

Date of arrest: _____ Where: _____

Can you think of any reason why the judge would be reluctant to appoint you to a case? _____

If yes, why? _____

As a CASA volunteer, will you be able to participate in on-going training and court appearances?

Can you see yourself visiting with a family in their home, or with a child in an alternative setting, i.e., foster home, group home, or residential placement?

Meaningful Past Volunteer/Work Experiences:

1. _____

2. _____

Present Volunteer/Work Activities:

1. _____
2. _____
3. _____
4. _____

Write a brief statement on why you have chosen to volunteer specifically with CASA at this particular time:

What do you feel your strengths are that you will bring to the program?

What are your primary concerns about becoming a volunteer in the program?

Please describe if you, your family, or friends, have any personal or work-related experiences with the following:

1. Child Welfare:

2. Juvenile Court System:

3. Foster Care:

4. Other:

References

Please list three references of people you know well, other than relatives, preferably for whom you have worked in either a paid or volunteer capacity. Please print all information, as we will need to contact your references.

1. _____
Name Relationship

Address

Phone Email (If Known)

2. _____
Name Relationship

Address

Phone Email (If Known)

3. _____
Name Relationship

Address

Phone Email (If Known)