



CASA of the Heartland
Volunteer Application – Part One

Name _____ Social Security Number _____
Home Address (include City, State, Zip) _____
Phone _____ Date of Birth _____
E-Mail address _____
How long have you lived at this address? _____ If less than 5 years, list previous address
(include City, State, Zip) _____

Current Employer _____ Phone _____
Employer's Address (City, State, Zip Code) _____
Brief description of your job duties: _____
May you be contacted at work? Yes No If yes, best time to reach you _____
 Not currently employed? Retired? Yes No

Formal Education (highest year of school completed): _____
Do you speak a foreign language? Yes No If yes, which language _____
Do you drive? Yes No Do you have regular access to a vehicle? Yes No

List any current community activities you are involved with: _____

List any current and previous volunteer work (include a brief description of duties and activities, and dates of service): _____

How did you learn of CASA of the Heartland? _____
What are your reasons for wanting to participate as a CASA Volunteer? _____

Are you willing to commit to eighteen (18) months of volunteer services? Yes No
As a CASA volunteer you will be required to attend court hearings for the children you represent. Will you be able to arrange your schedule to attend these hearings? Yes No

Do you have any training or experience in any of the following (please check all that apply):

| | | | |
|--|--|--|-------------------------------------|
| <input type="checkbox"/> Social Work | <input type="checkbox"/> Mental Health | <input type="checkbox"/> Drug or Alcohol Abuse Programs | <input type="checkbox"/> Writing |
| <input type="checkbox"/> Child Welfare | <input type="checkbox"/> Public Speaking | <input type="checkbox"/> Advertising or Public Relations | <input type="checkbox"/> Education |
| <input type="checkbox"/> Psychology | <input type="checkbox"/> Art or Graphics | <input type="checkbox"/> Law Enforcement | <input type="checkbox"/> Counseling |
| <input type="checkbox"/> Child Care | <input type="checkbox"/> Criminology | <input type="checkbox"/> News Media | <input type="checkbox"/> Medicine |

___ Other (identify) _____

Have you ever been convicted of, pleaded guilty to or pleaded no contest to a crime? ___ Yes ___ No
If yes, explain (include date, county, and state) _____

Are you, or have you ever been a sex offender registered with any Federal, State, or Local government agency, including any listing on a public web site? ___ Yes ___ No

Can you think of any reason why a judge might be reluctant for you to serve as a CASA Volunteer?

Do you consent to a routine check of your criminal records? ___ Yes ___ No

List three personal references (must be at least 18 years of age and a non-relative)

Name _____ Phone _____
Address (include City/State/Zip) _____

Name _____ Phone _____
Address (include City/State/Zip) _____

Name _____ Phone _____
Address (include City/State/Zip) _____

PLEASE READ CAREFULLY THE SECTION BELOW BEFORE SIGNING.

1. I certify that I have read this application and the information on it is complete and correct. I understand that any omissions or misrepresentation of information is grounds for termination of my volunteer activity.
2. CASA of the Heartland reserves the right to publish any press release, photo, and or names pertaining to CASA events.
3. 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 the children or the CASA of the Heartland's program's credibility, will not be accepted.
4. CASA of the Heartland 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.
5. This application, along with "Part Two" will be returned to

Volunteer Coordinator
CASA of the Heartland
P.O Box 6065
Elizabethtown, KY 42702

Signature

Date



**CASA of the Heartland
Volunteer Application – Part Two**

You may use additional paper if you need more space than provided.

1. Write a short summary about your interest in volunteering and how you hope to benefit from the volunteer experience. _____

2. Briefly explain what led to your decision to apply for a position in the CASA program? (What attracted you to this particular program?) _____

3. Briefly explain your philosophy of parenting, including the rights and responsibilities of both parents and children. _____

4. Briefly explain what role you believe society should play in
a) Protecting the rights of children _____

b) Helping a family overcome hardships and remain living together as one unit _____



CASA of the Heartland

Volunteer Application – Part Three

APPLICANT DISCLOSURE AFFIDAVIT

Our agency screens prospective employees and volunteers to evaluate whether an applicant poses a risk of harm to the children and youth it serves. Information obtained is not an automatic bar to employment or volunteer work, but is considered in view of all relevant circumstances. This disclosure is required to be completed by applicants for positions in order to be considered. Any falsifications, misrepresentations, or incompleteness, in this disclosure alone is grounds for disqualification or termination.

APPLICANT (full name): _____
 Social Security Number: _____ - _____ - _____

Initial the applicable column (“yes” or “no” - if yes, explain below), that applies to each statement below in regards to yourself (whether as an adult or juvenile):

| Yes | No | |
|-----|-----|---|
| ___ | ___ | Had a criminal conviction |
| ___ | ___ | Pleaded guilty to a charge (whether or not resulting in a conviction) |
| ___ | ___ | Pleaded nolo contendere or no contest to a charge |
| ___ | ___ | Had any judgment or order rendered against me (whether by default or otherwise) |
| ___ | ___ | Entered into any settlement of an action or claim |
| ___ | ___ | Had any license, certificate, or employment suspended, revoked, terminated, or adversely affected |
| ___ | ___ | Been diagnosed as having or been treated for any mental or emotional condition |
| ___ | ___ | Resigned under threat of termination of employment or volunteer work |

Any allegation, any conduct, matter, or thing (irrespective of the formal name thereof) constituting or involving (whether under criminal or civil law of any jurisdiction):

| | | |
|-----|-----|---|
| ___ | ___ | Any felony |
| ___ | ___ | Rape or other sexual assault |
| ___ | ___ | Drug or alcohol-related offenses |
| ___ | ___ | Abuse of a minor or child, whether physical or sexual |
| ___ | ___ | Incest |
| ___ | ___ | Kidnapping, false imprisonment, or abduction |
| ___ | ___ | Sexual harassment |
| ___ | ___ | Sexual exploitation of a minor |
| ___ | ___ | Sexual conduct with a minor |
| ___ | ___ | Annoying/molesting a child |
| ___ | ___ | Lewdness and/or indecent exposure |
| ___ | ___ | Lewd and lascivious behavior |
| ___ | ___ | Obscene literature |
| ___ | ___ | Assault, battery, or other offense involving a minor |
| ___ | ___ | Endangerment of a child |
| ___ | ___ | Any misdemeanor or other offense classification involving a minor or to which a minor was witness |
| ___ | ___ | Unfitness as a parent or custodian |
| ___ | ___ | Removing children from a State or concealing children in violation of a law or Court order |
| ___ | ___ | Restrictions or limitations on contact or visitation |
| ___ | ___ | Other (fully explain below) |

I have carefully read the above statements, and they are true and complete to the best of my knowledge:

Applicant Signature _____ Date _____

Witness to Signature _____ Date _____