

Dear Prospective Volunteer,

Thank you for your interest in becoming an advocate with our program, CASA of Travis County, Inc. Below you will find an application to become a CASA volunteer. After your completed application is received at our office, you will be contacted by telephone to schedule a pre-training interview. Applications should be received at least 1 week prior to the day that you wish to begin volunteer training, and your interview must be completed before you can begin training. Applications can be mailed, faxed or e-mailed using the contact information below:

CASA of Travis County
7701 N. Lamar Ste. 301
Austin, TX 78752
volunteer@casatravis.org
fax: (512) 459-4550

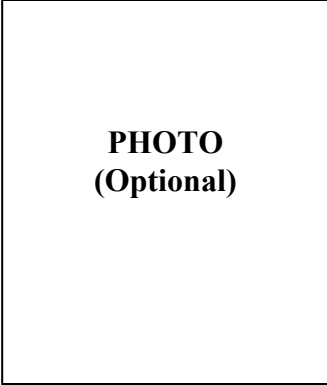
If you have additional questions, please feel free to call us at 459-2272. Again, thank you for your interest. We look forward to your involvement with CASA of Travis County.

“THERE IS A CHILD WHO NEEDS YOUR VOICE”

Lydia A. Garcia
Director of Training

Melia Graber
Volunteer Coordinator

CASA of Travis County, Inc.
7701 N. Lamar Ste. 301
Austin, TX 78752
phone 512-459-2272
fax 512-459-4550



VOLUNTEER APPLICATION

Date _____

First Name _____ Last Name _____

Address: _____

City: _____ State: _____ Zip: _____ County _____

Home Phone # _____ Fax # _____

Work Phone # _____ Other Phone# _____

Email address: _____

Social Security #: _____ Driver's License #: _____ State: _____

Date of Birth: _____ Age: _____ Place of Birth: _____ Height: _____

Weight: _____ Hair Color: _____ Eye Color _____ Sex: F _____ M _____

Employer: _____ Job title: _____

Employer's address: _____

Are you a CASA Board Member? Yes _____ No _____

Where did you hear about the CASA of Travis County program? _____

Current hobbies and / or interests: _____

EMPLOYMENT HISTORY:

List your last three places of employment (the first being your present employer)

NAME OF COMPANY & PHONE #	POSITION	SUPERVISOR	EMPLOYMENT DATES TO / FROM	REASON FOR LEAVING

Employment Status: Full Time Part Time: Hours per week _____
 Retired Other _____

Can we contact you at work? _____

EDUCATION:

Circle highest completed:

High school: 9 10 11 12 College: 1 2 3 4 Graduate: 1 2 3 4

Major: _____ Degree _____

Currently enrolled in School? _____ Part or Full Time _____ Exp. Grad. Date? _____

LANGUAGE:

Please indicate in which languages you can communicate:

English Spanish Chinese Portugese
 Japanese Tagalog Vietnamese Other _____

PERSONAL

Do you have any personal or professional experience with counseling or therapy?

Yes No If yes, please
 _____ elaborate: _____

List any community groups in which you are presently active (professional associations, faith communities, service organizations, etc):

Are you a member of Kappa Alpha Theta sorority? Yes _____ No _____

Do you have any experience working with children? Yes _____ No _____
(If yes, please give organization names and details)

Do you give CASA of Travis County, Inc. permission to obtain information from these organizations regarding your membership?

Yes _____ No _____ If no, please explain _____

Have you or your family had personal/ professional experience with: (If yes, please give a brief explanation)

Child abuse	Yes _____ No _____	_____
Foster care	Yes _____ No _____	_____
Juvenile court system	Yes _____ No _____	_____
Child Protective Services	Yes _____ No _____	_____
Other child service agencies	Yes _____ No _____	_____

Have you ever applied with another organization that works with children? Yes _____ No _____

Were you accepted? Yes _____ No _____ Please give name(s) of organization(s) & year:

Have you ever applied to this or another CASA program before? Yes _____ No _____ If yes, explain:

Current Marital Status: Single Married: Date _____ Separated: Date _____
 Committed Relationship Widowed: Date _____

If married/committed: Spouse/Partner's Name _____ Age _____

Spouse's Employment and Position _____

Emergency Contact _____ Phone Number _____

Please answer the following questions and give details and explanations if answer is yes:

Have you ever been hospitalized for an emotional issue? Yes _____ No _____
Have you ever used illegal drugs? If yes, please explain. Yes _____ No _____
Have you ever abused legal drugs or alcohol? If yes, please explain. Yes _____ No _____

Details: _____

CRIMINAL HISTORY

CASA of Travis County will ask all volunteers to complete a criminal records check which will reveal any arrest, charge or conviction. Please respond to the following questions so that this history can be discussed and evaluated.

If you answer yes to any of the following questions, please offer an explanation in the space provided below

Have you or your family ever been involved in a legal action in Travis County? Yes ____ No ____

Have you ever been arrested or charged with a misdemeanor? Yes ____ No ____

Have you ever been convicted of a misdemeanor? Yes ____ No ____

Have you ever been arrested or charged with a felony? Yes ____ No ____

Have you ever been convicted of a felony? Yes ____ No ____

Have you ever been or are you currently on parole? Yes ____ No ____

Have you ever been convicted of a traffic violation? Yes ____ No ____

Have you ever had any DWI arrests, charges, or convictions? Yes ____ No ____

Have you ever had your driver's license revoked or suspended? Yes ____ No ____

Have you ever been arrested or charged or with any sexual misconduct (including pornography)? Yes ____ No ____

Have you ever been convicted of any sexual misconduct (including pornography)? Yes ____ No ____

Details:

The following questions are for statistical purposes only. Please mark the choice or choices that best describe you.

- Ethnic Origin:**
- | | | |
|--|---|---|
| <input type="checkbox"/> Native American | <input type="checkbox"/> Hispanic/Latino | <input type="checkbox"/> African American/African |
| <input type="checkbox"/> Caucasian | <input type="checkbox"/> Bi-racial/Multi-racial | <input type="checkbox"/> Asian/Pacific Islander |
| <input type="checkbox"/> Not known | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Decline to State |

Please provide COMPLETE contact information for five non-family references that have known you for at least one year.

Please do not list a relative, significant other, or two people from the same household. CASA of Travis County will send an email correspondence with a description of the CASA program and reference form for them to complete and return. CASA will contact three of your references and will only contact the remaining two if the first three cannot respond to our inquiries.

(1) Name _____ **Phone** _____

Email _____

Address
(if email address not available) _____

Relationship to you _____

(2) Name _____ **Phone** _____

Email _____

Address
(if email address not available) _____

Relationship to you _____

(3) Name _____ **Phone** _____

Email _____

Address
(if email address not available) _____

Relationship to you _____

(4) Name _____ **Phone** _____

Email _____

Address
(if email address not available) _____

Relationship to you _____

(5) Name _____ **Phone** _____

Email _____

Address
(if email address not available) _____

Relationship to you _____

Please respond to the following:

I am interested in working with children and families as a CASA volunteer because...

I feel that I can be a fair and objective advocate for a child because...

Any hesitations or concerns regarding my participation in the CASA program at this point are...

When would you like to begin CASA University Volunteer Training?

CASA volunteers give 15-20 hours a month. When would you fit this time into your schedule?

**CASA of Travis County, Inc.
Training Agreement**

Prospective volunteers are asked to read and sign the following training description and agreement:

Description:

The initial training consists of 33 hours broken down into 30 hours of classroom time and 3 hours of courtroom observations. The classroom time is comprised of 10 classroom sessions lasting 3 hours each. Trainees must begin with **CASA 101**, but then may attend the remaining classes in any order.

Agreement:

1. I understand that participation in the Pre-Service Volunteer Training is required and essential, and includes 30 hours of scheduled classroom time.
2. I understand that, in addition to the classroom sessions, I will be required to complete 3 hours of courtroom observation at the Travis County Courthouse.
3. **Attendance:** After completing CASA 101, I understand that I may complete the remaining nine classes in as few as 5 weeks, but that I may take **no more than 4 months to complete all training requirements.**
4. I am aware that the Pre-Service Training Class is a part of the screening process, and that acceptance to participate in Training does not guarantee that I will be sworn in as a CASA or that I will be assigned to a case. I further understand that either I or CASA can choose to discontinue my involvement in the Training/Screening process at any time without further obligation on the part of either party.
5. Upon completion of Training, my participation in the training process, as well as other screening material (returned reference forms, criminal record check, and DPRS Central Registry check) will be reviewed for the purpose of determining my eligibility to be assigned a case as a CASA.

I understand and am willing to meet all the conditions stated above, and wish to participate in the CASA Pre-Service Training.

Signature of Volunteer

Date

The Undersigned acknowledges and agrees that:

I am interested in becoming a CASA volunteer, and know of no reasons why I should not be assigned to a child in the CASA program. I am aware that the children CASA serves have been abused, neglected, or abandoned by adults. I do not want to be another cause of disappointment to a child, and acknowledge that I will make a commitment of at least one year to the child(ren) and case to which I may be assigned.

As a CASA volunteer I will be willing to: (Please write yes or no)

- _____ Commit a minimum of a year to being a CASA volunteer.
- _____ Participate in CASA's volunteer training program.
- _____ Participate in further training as offered to active volunteers in the program.
- _____ Visit in person with the child(ren) to which I may be assigned.
- _____ Prepare written reports to the court with the guidance and assistance of CASA.
- _____ Participate and attend court hearings and meetings on a child's case.

I understand that I will need to carry liability insurance on my car. I agree to maintain this minimum liability insurance throughout my program participation with CASA. I understand that I may transport a child during the course of my CASA duties, and must maintain proof of active liability insurance and current drivers license in my CASA file. Yes _____ No _____
I attached proof of car insurance to this application. Yes _____ No _____

As an applicant to CASA of Travis County I understand and acknowledge that:

CASA of Travis County is not obligated in any way to accept me into the volunteer training program by submission of this application.

CASA of Travis County retains the right to refuse any individual they feel would not be in the best interest of the program and further, CASA is not required to state reason(s) for non acceptance into the program.

CASA of Travis County will hold all information in the volunteer's file in strictest confidence. Such information becomes the property of CASA of Travis County.

I authorize CASA of Travis County to conduct all background checks necessary to insure the safety and suitability of all program clients and participants including the request of a criminal record check by the Federal Bureau of Investigation. I agree that the results of all background checks will be sent directly to the office of CASA of Travis County.

I give permission to CASA of Travis County to release information about my application, acceptance, and/or participation in this program to any other CASA program to which I may apply in the future.

I have truthfully responded to all of the questions on this application.

Signature of applicant

Date