



Knox County CASA Volunteer Application

Qualifications and Personal Information

Please read the directions carefully and complete all sections of the application. All information provided by you is confidential. The application takes about 30 to 45 minutes to complete. After submitting your application, the volunteer coordinator will contact you regarding the next steps. If you have any questions or concerns or do not have access to the internet please contact our office at 812-882-2108.

Qualifications

Are you 21 years of age or older?	Yes	No
If you are not 21, are you a student seeking volunteer hours for your degree?	Yes	No
Do you text?	Yes	No

Personal Information

First Name	Gender
Middle Name	Hispanic
Last Name	Race
SSN	Birthdate
AKA	Birth City
Address	Birth State
Address 2	Home Email
City	Work Email
State	Home Phone
Zip	Cell Phone
County	Work Phone
	Best Phone

Marital Status

Primary Language

Education

Type

Degree

Major

Contact Information

Please tell us about your family. List all children even if they don't live with you. Also list other people who live with you but may not be related to you. If you are filling out the paper version of this application please use the space on the back of the page to list additional children.

Spouse/Partner

First Name

Middle Name

Last Name

Phone No.

Company Name

Position/Title

Children

Child 1

Child 2

Child 3

First Name

Last Name

Age

Gender

Emergency Contacts

First Name

Last Name

Phone

Phone 2

Relationship

Experience

Please tell us about any personal and/or professional experience you have with the following agencies, organizations or areas. You are not required or expected to have any experience in these areas to be a volunteer. If you are filling out the paper version of this application please use the space on the back of page to list any additional experience you may have.

Child Protective Agencies
If yes, Explanation:

Yes No

Foster Care
If yes, Explanation:

Yes No

Juvenile Court
If yes, Explanation:

Yes No

Other Child Service Agencies
If yes, Explanation:

Yes No

Child Abuse or Neglect
If yes, Explanation:

Yes No

Domestic Violence
If yes, Explanation:

Yes No

Mental Illness/Mental Health Treatment
If yes, Explanation:

Yes No

How did you hear about our program?

Volunteer Experience

Please describe all current and past volunteer work. If you are filling out the paper version of this application please use the space on the back of page to list any additional volunteer experience you may have.

Organization Name

Supervisor First Name

Supervisor Last Name

From Date

To Date

Reason for Leaving

Responsibilities

Employment

In this section please provide us with your current place of employment. Please enter as much information as you can. If you are filling out the paper version of this application please use the space on the back of page to list your previous employer.

Employment History

Career Type

Status

Current Employer

Job Title

Company

Address

Address2

City

State

Zip Code

Responsibilities

Work Hours

From

To

Reason for Leaving

Supervisor First Name

Supervisor Last Name

Permission to contact

Phone No.

Date

Date

Vehicle Information

Please tell us about your ability to travel to and from CASA trainings, hearings, and child visits?

Driver's License Number

Auto Insurance Company

State

Exp. Date

Background Information

As with any volunteer opportunity, there is a process for preparation and qualification. In order to start the process, you must complete and return this application. We will also complete a one on one interview. To further prepare, we will provide you the 30 hour pre service training. Please answer the following questions.

Have you ever worked with children? When and in what capacity? Please list age range.

What has helped you decide to become a CASA now?

Please write a brief statement about why you are interested in serving as a CASA.

How long have you considered becoming a CASA?

How do you anticipate your cultural background will influence you in your CASA role?

Please explain your philosophy of parenting, including the rights and responsibilities of both parents and children.

Please List your residential history for the past seven (7) years.

City

County

State

Years Lived There

City

County

State

Years Lived There

Please list your current full legal name and any other surnames or aliases you have been known by

Full Legal Name

Maiden/Surnames/Aliases

Criminal History

We will do a comprehensive background check with the state as well as a national database check. Please be upfront about any and all incidents that have occurred in your past.

Have you ever been arrested?

Yes No

If yes, Explanation:

Have you ever been charged with a crime?

Yes No

If yes, Explanation:

Have you ever been involved in a juvenile court case (as an adult or child)?

Yes No

If yes, Explanation:

Have you ever been the subject of a child abuse investigation?

Yes No

If yes to the above question please explain when, where, and an overview of what occurred.

Was that investigation substantiated? If yes or unsure please fill in below.

Yes No

Have you been involved in any other court proceedings?

Yes No

If yes, Explanation:

Personal References

Please list the names, full address, telephone and email addresses of four non related individuals you have known for at least two years. These should be people who know you well and can address themselves as to how you relate to children/people in general, and how well you could fulfill the responsibilities of a CASA. The CASA program will send a questionnaire to the people named as references.

First Name

First Name

Last Name

Last Name

Phone

Phone

Relationship

Relationship

Email

Email

Address

Address

Address 2

Address 2

City

City

State

State

Zip Code

Zip Code

First Name	First Name
Last Name	Last Name
Phone	Phone
Relationship	Relationship
Email	Email
Address	Address
Address 2	Address 2
City	City
State	State
Zip Code	Zip Code

Agreement

I agree to provide a copy of my current driver's license. Yes No

I agree to provide a copy of the Certificate of Insurance for verification. I also agree to provide updated copies as my insurance renews. Yes No

I can participate in on-going trainings and court observation. Yes No

I am aware that I am being asked, if accepted as a volunteer, to commit to a minimum of one year in the CASA Program or for as long as the child/children to whom I am assigned are under the courts jurisdiction. Yes No

I agree to complete 12 hours of continuing education each year following my appointment as a CASA. Yes No

I agree that after I submit my application to become a CASA, if I have criminal charges filed against me or become involved in a child abuse or neglect incident or investigation, I will immediately notify CASA staff. Yes No

The Knox Co. CASA Program is administered through Knox County Superior Court 1, Juvenile Judge Gara U Lee. CASA's are appointed independently through the juvenile court, having jurisdiction over cases involving children.

We are members of the National Court Appointed Special Advocate Association headquartered out of Seattle, Washington and are certified by the Indiana State Office of GAL/CASA, Indiana Supreme Court, Division of State Court Administration. The Knox County CASA Program is not a state agency and is not part of the Indiana Department of Child Services. I have read and understand the above information. Yes No

****The Knox County CASA Program prohibits discrimination on the basis of race, color, creed, sex, age, marital status, national origin, mental or physical disability, political belief or affiliation, veteran status, or sexual orientation. Please answer the following questions.**

Release

By submitting this application electronically, I hereby affirm that my responses on this application to become a Court Appointed Special Advocate are true and accurate. I hereby authorize the CASA Program, to investigate my background which includes criminal records and background checks that will consist of, but not limited to, sex offenders registry, a DCS Child Abuse Registry check as well as social security number verification. The criminal background check will be run through a national database which includes the National Sex Offender Registry and will include any criminal history from other county or states where you have resided or worked for the previous 7 years. There may also be employment verification. A BMV check will be conducted. The CPS background check request will be sent to the local DCS to conduct a background check with the child abuse registry and child protective services background check as well as the department in any other county or state that you as the prospective volunteer have lived in the previous 7 years. The social security verification is sent to the national database which verifies that a valid social security number was issued. I authorize the CASA Program to post or display pictures of me to further the CASA works. I understand that my involvement with CASA will also be shared with other CASA's and stakeholders (such as the Court, DCS workers, community providers) and current CASA, including release of my name, telephone, picture, and email address unless specifically limited by me in writing. I will be screened for acceptance and assignment to the CASA Program through this application and initial interview process prior to and in conjunction with the pre service training. I am required to complete the screening process and an individual interview designed to gather information about me. My application and interview will be in depth to determine if I am an appropriate volunteer for CASA work as well as for me to evaluate the CASA role. The screening interview will be conducted face to face. I understand that the requested information in this application and associated forms are part of what will be used for the purpose of determining my aptness to be a CASA. Any failure to sign releases as requested or falsification of verbal or written communication with the CASA Program is grounds for rejection or delay. I will be expected to serve a minimum of one year. If unforeseen circumstances prevent me from fulfilling my CASA obligation, I will submit my written resignation to the CASA Volunteer Coordinator with as much advance notice as possible. The CASA core training consists of thirty hours. I must complete all thirty hours and then be invited to be sworn in by the Juvenile Judge before I am considered for assignment for a case. Any person who has a conviction or charges pending for a felony or misdemeanor involving a sex offense, violent act, child abuse or neglect, or related acts that should pose risks to children or to the CASA Program's credibility, or anyone who has a substantiated case of abuse or neglect will not be accepted into the program. Any person who is found to have committed a misdemeanor or felony that is unrelated to or would not pose a risk to children and would not negatively impact the credibility of the CASA Program will be evaluated on a case by case basis. Considerations will include the extent of rehabilitation since the misdemeanor or felony was committed, as well as other factors that may influence the decision to accept the applicant as a CASA. The CASA staff will consider the impact that the criminal record may have on the credibility of the prospective CASA in court, and the resulting possible effect on the child. CASA staff reserves the right to accept or reject anyone who applies to be a CASA and dismiss any CASA when necessary.

Thank You

We appreciate the time you took completing this application. Following a review, you will be contacted regarding the next steps. For security purposes, please close your browser after submitting this application.

Signature

Date

Please save the completed form and email it to hwhitehead@knoxcounty.in.gov. You can also print the application and return it to us by mail to Knox County CASA 112 N 7th St. Vincennes IN 47591 or fax 812-882-6180.