



Application Date: \_\_\_\_\_

**PLAINSWEST COURT APPOINTED SPECIAL AVOCATES (CASA)**

The information on this form will help us assess your qualifications to serve as a Court Appointed Special Advocate. Please read the questions carefully and complete all sections of the application as thoroughly as possible.

**PERSONAL INFORMATION**

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Address \_\_\_\_\_ Home Phone \_\_\_\_\_  
City/State/Zip \_\_\_\_\_ Cell Phone \_\_\_\_\_  
e-mail address \_\_\_\_\_  
Maiden/Prior Name/AKA \_\_\_\_\_  
Marital Status \_\_\_\_\_ No. of Children \_\_\_\_\_ Ages & Gender \_\_\_\_\_  
Spouse's Name \_\_\_\_\_ Spouse's Occupation \_\_\_\_\_  
Local Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
How Heard About CASA \_\_\_\_\_

**EMPLOYMENT INFORMATION**

Current Employment Status (circle one)    Employed                      Unemployed                      Retired                      Homemaker  
Name of current employer or previous employer if retired or unemployed \_\_\_\_\_  
Address \_\_\_\_\_ Work Phone \_\_\_\_\_  
Supervisor \_\_\_\_\_ Work e-mail \_\_\_\_\_  
May we call and/or e-mail you at work?    Yes                      No  
Title and brief description of work \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Describe any personal or employment constraints that may restrict your availability \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
How long have you been with your current employer? \_\_\_\_\_  
If employed at current job less than six months, who was your former employer? \_\_\_\_\_  
Address of former employer \_\_\_\_\_ How long were you there? \_\_\_\_\_

**EDUCATIONAL DATA**

High School (circle last grade completed) 9 10 11 12  
College, Graduate, Post Graduate (circle last grade completed) 13 14 15 16 17 18 19 20 21  
Area of study \_\_\_\_\_ Degree \_\_\_\_\_

Are you presently attending school? Yes No If yes, where? \_\_\_\_\_ Area of study \_\_\_\_\_

Are you an active member of the military? Yes No Retired? Yes No

Do you have any special skills or licenses? Yes No If yes, please explain/describe \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

How did you become aware of the CASA program? \_\_\_\_\_

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

Are you 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 and/or special skills that you will bring to this program? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**ACTIVITIES AND INTERESTS**

List community service organizations or clubs to which you belong: \_\_\_\_\_

List hobbies and special interests: \_\_\_\_\_

Previous and/or current volunteer activities: \_\_\_\_\_

**FOR CASE MATCHING AND STATISTICAL PURPOSES**

Ethnic Background _____	
Languages Spoken _____	Can you sign for the deaf? _____
Are you willing to work with all ages of children? (Please circle) Yes No I prefer ages: 0-5 6-12 13-17	

Please be aware that CHILDREN ARE FREQUENTLY MOVED. If you have a preference in the county area where you would be willing to accept a case assignment, you may be required to travel to other areas in the county to maintain contact with the child to whom you are assigned.

Do you have a preference on what county to serve? (circle all)	Cheyenne	Kimball	Deuel
Do you prefer a geographical area? Yes No	If yes, please specify _____		
Would you be willing to travel to maintain contact? Yes No Possibly			

**BACKGROUND INFORMATION**

- 1. Have you ever been:
  - (a) Arrested for a crime against a child? (Please circle) Yes No
  - (b) Arrested for a violent felony? Yes No
  - (c) Arrested for a sex crime? Yes No
- 2. Have you been convicted of any crime in the past five years (excluding vehicle code infractions, but including vehicular misdemeanors or felonies)? Yes No
- 3. Are you currently undergoing prosecution for any crime (excluding vehicle code infractions, but including vehicular misdemeanors and felonies)? Yes No
- 4. Have you ever been arrested or convicted of a crime not mentioned above? Yes No
- 5. Are you, or have you ever been, the (circle all that are appropriate): **sibling, household member, parent, significant other or spouse** of a child who has been
  - (a) The subject of a report to a Child Protective Agency? Yes No
  - (b) An adjudicated dependent of any juvenile court? Yes No
  - (c) Placed under informal supervision in any county's children's Social Service Agency? Yes No
- 6. As a child, were you ever the subject of a child abuse or neglect report? Yes No
- 7. Are you currently paid or reimbursed to provide a service to children and/or parents within the Child Welfare and/or Juvenile Court System? Yes No
- 8. Have you had a personal experience involving (check all that apply)  
 Child Welfare     Foster Care     Juvenile Court     Other agencies offering service to a child?

If you answered yes to any of the above questions, please explain. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please be aware that 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 post risks to children or the CASA program's credibility may not be accepted as a CASA volunteer.**

Write a brief statement explaining why you have chosen to work in the child advocacy program at this particular time in your life. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Would you like to volunteer on a regular basis in the CASA office or help with special events? \_\_\_\_\_

What skills do you possess that could be useful in the office? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REFERENCES**

Please list three personal references. One must be an employer or co-worker if employed. Teachers, ministers, volunteer supervisors or similar may be used in place of employer if unemployed. If you are currently seeing a therapist, please include him or her in the box provided. *Please do not list relatives.* All references will be mailed a questionnaire to complete. Application approval is pending receipt of at least three returned references.

- 1. Name \_\_\_\_\_ Relationship \_\_\_\_\_  
 Address \_\_\_\_\_ Email \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_
- 2. Name \_\_\_\_\_ Relationship \_\_\_\_\_  
 Address \_\_\_\_\_ Email \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_
- 3. Name \_\_\_\_\_ Relationship \_\_\_\_\_  
 Address \_\_\_\_\_ Email \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_ Phone \_\_\_\_\_

**Upon receipt of your application you will be contacted by CASA program staff with your next steps.**

*I understand that the CASA Program (hereafter "Program") will require that I complete at least one (1) personal interview and criminal records check and that submitting an application does not ensure acceptance into the Program. I further understand that I may be required to attend mandatory training as established by the program.*

*I hereby certify that all statements made on this application are true and correct to the best of my knowledge. I understand that by submitting this application, I authorize the Program to gather and receive information pertaining to any possible child mistreatment claims or law violations pertaining to me by means of a Child Abuse/Neglect Registry Check and a Criminal Records check. My acceptance as a volunteer could be affected by the information found.*

*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 for a minimum of one (1) year in the Program. If unforeseen circumstances prevent me from fulfilling this obligation, I will submit my written resignation to the CASA office 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 volunteer. I will discuss these matters only with those persons who are directly involved with the case or who will be consulted for their professional knowledge and expertise.*

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**