



Volunteer Application

601 Water St ♦ Waxahachie, TX 75165
Phone: (972) 937.1455 ♦ Fax (972)937.1285
www.casaofelliscounty.org

I am interested in classes during: ___Day ___Evening

GENERAL INFORMATION

Name: _____ Today's Date: _____

Are you known by other names? _____ Date of Birth: _____

Address: _____

City, State, Zip: _____ How long at this address? _____

If less than 5 yrs, your last address: _____

Driver's License Number: _____ State of DL#: _____

Home Phone: _____ Mobile phone: _____

Email: _____

Emergency contact: Name: _____ Phone: _____

How did you hear about CASA?

Education: High School Some College College Post Grad PhD/MD Other

Ethnicity: African American Anglo Asian/Pacific Islander Hispanic
 Native American Other: _____

Marital Status: Single Married Widowed Divorced

Name of spouse (if applicable): _____

Spouse employer: _____ Bus. Phone: _____

Children's names: _____ Age: _____

_____ Age: _____



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family by Child Protective Services. Our volunteers collaborate with family members, caseworkers, lawyers, therapists and caregivers (foster parents, relatives, etc) to provide a recommendation to the judge as to where the children will have a safe and permanent home. As such, volunteers are expected to visit people involved with the child, attend court hearings, write reports to the court and communicate with all involved in the child's life through the legal process. Volunteers with full time jobs will have to be flexible with their time throughout their up to one year commitment, as they will have to attend court hearings and 'staffings' during business hours.

Based on the description above, is there anything that could limit you from performing these required duties? _____

Are you able to attend CPS staffing and court appearances between 8:30am & 6:00 pm? _____

Can you see yourself visiting with a family in their home or with a child in a foster home? _____

How do you feel about working with a child and family from a different income bracket or culture? _____

How do you feel about working with a family whose values differ from your own? _____

Describe your temperament or personality: _____

What skills do you believe you will need to develop to succeed as a CASA volunteer? _____

Sometimes the "system" or the "bureaucracy" of the courts can be frustrating. It can move slowly, is not always scheduled at your convenience, and a CASA volunteer isn't always wanted by the lawyers, social workers, the families and sometimes the child. How do you think you would react to this feeling of frustration and /or rejection?

Do you feel you fully realize the importance of the commitment you are making, not only to a young child, but in agreeing to stay with the program for possibly up to one year?

What do you feel are the strengths and challenges that you will bring to this program? For example, background in counseling, legal, bilingual, etc.; challenges such as health, family obligations, limitations on hours available).



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Strengths: _____

Challenges: _____

REFERENCES

Please list 3 personal references. At least one reference must be from someone other than a friend or co-worker (i.e., minister, rabbi, teacher, employer, therapist, etc). References from relatives are not accepted. Provide complete mailing addresses or list an email or fax where a referral questionnaire can be sent.

Name: _____
Address: _____
City, State, Zip: _____
Phone: _____ Fax: _____
Email: _____ Relationship: _____

Name: _____
Address: _____
City, State, Zip: _____
Phone: _____ Fax: _____
Email: _____ Relationship: _____

Name: _____
Address: _____
City, State, Zip: _____
Phone: _____ Fax: _____
Email: _____ Relationship: _____



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Volunteer Acknowledgement Form

I hereby certify that the above information is correct and accurate to the best of my knowledge, and I authorize inquiries concerning my suitability as a CASA volunteer. I understand that all the information will be held in strict confidence and used only for the purpose of determining my suitability as a volunteer.

I understand that qualities of a successful CASA volunteer include interpersonal skills, compassion, punctuality, and reliability. I further understand that if concerns arise CASA reserves the right to reject *an applicant at any time*, including during the training process or after certification.

I understand that all information provided to and obtained by CASA will be held in the strictest of confidence. CASA may, however, disclose to other agencies and organizations, which utilize volunteers, the fact that I applied for and/or served with CASA as a volunteer. Furthermore, all information obtained by CASA will be deemed to be the sole property of the Agency, and shall not be available to me or anyone outside the Agency. I understand and agree that I am not obligated if called upon to perform services of a CASA volunteer and that CASA is not obligated to assign or actively seek to assign a child to me.

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

- Commit a minimum of up to a year to being a CASA volunteer
- Participate in CASA's new 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 guidance and assistance from CASA
- Participate and attend court hearings and meetings on a child's case
- Record and turn in a monthly log of my activities on my case

The criteria used in the selection of volunteers is designed to ensure that the individual is able to meet the responsibilities of a CASA volunteer. No individual will be rejected because of race, color, religious creed, national origin, gender, age, or disability.



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CASA is guided in practice and policy by our organizational values, which include “embracing change, challenge and diversity.”

Signature

Date

Print name

CRIMINAL BACKGROUND CHECK POLICY

Due to the nature of the CASA volunteer's responsibilities and contacts, a criminal background check of all applicants will be conducted through the Texas Department of Public Safety. Your information will also be processed with the Texas Department of Family and Protective Services to check for any history with Child Protective Services.

Criminal Background Check Policy

Potential and existing members of the Board of Directors, staff, and volunteer advocates are required to cooperate with a complete criminal record investigation through the Texas Department of Family and Protective Services and any agency or entity CASA may utilize to assist in the investigation. No person is considered qualified who has had prior convictions for child abuse or neglect, or related acts that would pose a risk to children or to the program's credibility. Candidates for Board of Director, Staff, or Volunteer will be eliminated for consideration based on, but not limited to, the following guiding principles:

- Zero tolerance for all registered sex offenders, all convictions of crimes against children and all convictions of violent acts.
- Persons with pending charges for child abuse and neglect, sexual assault, and violent acts offenses will be considered only after resolution of such charges.
- Because driving is required daily from staff members & volunteers, CASA will not consider applicants who have had felony convictions involving a motor vehicle in the last 10 years.
- Any other offense that could hurt the credibility of the CASA organization will be considered on a case by case basis.

Have you ever been arrested/charged and/or convicted of a misdemeanor? Yes No

Have you ever been arrested/charged and/or convicted of a felony? Yes No

Have you ever been or currently on probation? Yes No

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

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

Have you ever been arrested/charged or convicted of any sexual misconduct (including pornography)? Yes No

Has anyone in your family ever been arrested/charged or convicted of any sexual misconduct (including pornography)? Yes No

If yes, please list relationship and whether or not you still have contact with that family member: _____



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Policy Acknowledgement

I hereby acknowledge that I have been informed that CASA conducts background investigations to obtain information on criminal history and Child Protective Services involvement. I understand that any information obtained will be used to aid in determining my qualifications for services as a Volunteer for CASA. Volunteers accepted into training will be asked to sign a criminal background check policy and release of information. I understand that by refusing to sign a release of information for or submitting to fingerprinting for any of the background checks CASA will reject my volunteer application.

Please sign and date if you have read and understood the criminal background check policy.

Name

Date

The Texas Department of Family and Protective Services (FPS) operates a Central Registry that identifies persons whom FPS has found to have abused or neglected children. Designated agencies use this form to forward requests for Central Registry checks and DPS Criminal History checks. Requestors have a right to know what information is provided and to correct any incorrect information.

Texas Department of Family and Protective Services
Elsa L. Mathis
System Support Specialist
503 Priest Drive
Killeen, TX 76542
254-200-4260

REQUIRED IDENTIFYING INFORMATION ON REQUESTER - The requester must provide all of this information in order for a check to be made:

First Name	Middle Name	Last Name			
Other names or spellings used (married, maiden, alias, etc.) - First, Middle, Last (continue on back as needed)					
Residence Street Address		City	County	State	Zip Code
Residence Telephone No. (A/C)	Date of Birth	Gender : <input type="checkbox"/> Male - <input type="checkbox"/> Female		SSN	
Race (check all applicable) <input type="checkbox"/> Am Indian/AK Native <input type="checkbox"/> Nat Hawaii/Pacific <input type="checkbox"/> Asian <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Unable to Determine		Ethnicity (check one, only) <input type="checkbox"/> Hispanic <input type="checkbox"/> Not Hispanic <input type="checkbox"/> Unable to Determine			
List other places you have resided (for a minimum of the past 5 years - continue on back as needed)					

<p>SEND RESULTS OF REQUESTED CHECKS TO:</p> <input type="checkbox"/> Requester, OR <input checked="" type="checkbox"/> Designee - Name of Designee: Christa Popham (849509) Please check below to indicate Agency the Designee Represents: CASA – Ellis Cty Mailing Address of Designee (City, State, Zip): P O Box 2646 Waxahachie, Tx 75168 972-937-1455 Email Address: christapopham@gmail.com	<p>RESULTS OF CENTRAL REGISTRY CHECK:</p> <p>FPS returns the results of the Central Registry checks to the requestor or designee indicated to the left. The requester is entitled to have the results provided to him or to designate another person or entity to receive the results.</p> <p><u>NOTICE - NOTICE - NOTICE:</u> The requester may not have exhausted all opportunities to contest findings in the Central Registry. Therefore, a requester who designates another person/entity to receive the results of the check is hereby provided notice and cautioned that if he or she disagrees with any such findings, that he or she may have the right to challenge any such findings, and that he or she is authorizing FPS to release any such findings to a third party prior to or during any challenge to the accuracy of those findings.</p>
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Type of Agency:
<input type="checkbox"/> a Texas affiliate of Big Brothers/Big Sisters of America <input type="checkbox"/> a Texas chapter of the Make-a Wish Foundation of America <input type="checkbox"/> the "I have a Dream/Houston" program <input type="checkbox"/> a local affiliate of Children's Advocacy Centers of Texas <input checked="" type="checkbox"/> an organization providing Court-Appointed Special Advocates for abused/neglected children (CASA)

Signature of Requester _____ Date of Request _____

SUBSCRIBED AND SWORN TO before me this ____ day of _____, _____.

[Notary stamp or seal]

Notary Public

DPS Criminal History Check Requested? (for designated agency use only) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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