

CASA/GAL Volunteer Application

NAME:	SOCIAL SECURITY #:	PHONE:
ADDRESS:	CITY/STATE:	ZIP:

EMERGENCY CONTACT:	RELATIONSHIP:	PHONE:
ADDRESS:	CITY/STATE:	ZIP:

EMPLOYMENT

EMPLOYER:	MAY WE CONTACT YOU AT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO	PHONE:
ADDRESS:	CITY/STATE:	ZIP:

Write a brief description of your work:

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EDUCATION

Highest year of school completed:

Are you presently attending school? YES NO

Will you receive academic credit for your CASA/GAL volunteer work? YES NO

Do you speak a language other than English? YES NO

If yes, specify which language(s):

AVAILABILITY

Are you willing to commit to one year of volunteer service? YES NO

How many hours per week are you available?

What days and hours of the week are you available?

Do you have a valid driver's license? YES NO

Do you have access to a car? YES NO

As a CASA/GAL 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

REFERENCES

Please list no more than one family member.

NAME	ADDRESS/CITY/STATE	PHONE
1)
2)
3)

ESSAY QUESTIONS

Please use a separate sheet of paper if you need additional space.

Why do you want to become a CASA/GAL volunteer?

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How did you learn about the CASA/GAL program?

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What do you hope to get out of this volunteer experience?

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ESSAY QUESTIONS

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

List your current and previous volunteer work.

Briefly explain what role you believe society should play in protecting the rights of children and in helping a family overcome hardships in order to remain living together as one unit.

What experience or knowledge of children and families do you have that will assist you in determining what may be in a child's best interests? (e.g., parenting, child care, etc.)

Briefly describe any experience you have had with social service agencies as a staff person, foster parent, volunteer or client.

Describe any strong interests, knowledge areas, hobbies or special skills that you could offer as a volunteer.

AUTOBIOGRAPHY

Please write a one-page autobiography.

A large rectangular area with horizontal dotted lines for writing an autobiography. The lines are evenly spaced and cover most of the page's width and height.

BACKGROUND CHECK

Any applicant 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 children or to the CASA/GAL program's credibility is not eligible to be a CASA/GAL volunteer.

I, _____, hereby affirm that all of the answers provided on my volunteer application are true. I hereby authorize the CASA/GAL program and any law enforcement agency they authorize, to investigate my background to determine my fitness as a potential volunteer.

I understand that the information requested in this application will be used only for the purpose of determining my suitability as a CASA/GAL volunteer. Further, I understand that completion of training does not guarantee that I will be assigned a case. If I have successfully completed the training and have met all other requirements, and it has been determined that I am a suitable volunteer, I understand that I will be expected to serve a minimum of one year in the CASA/GAL program. If unforeseen circumstances prevent me from fulfilling this obligation, I will submit my written resignation to the program director 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 CASA/GAL volunteer. I will discuss these matters only with those persons directly involved in the case or with those who will be consulted for their professional knowledge and expertise.

I also understand that if for any reason it becomes apparent that my activities are contrary to the policies, goals and/or philosophy of the CASA/GAL program and their ability to provide quality services to abused and neglected children, my services as a CASA/GAL volunteer will be terminated.

I submit the statements on this application are true, complete and correct to the best of my knowledge. I understand that falsification on this application can disqualify me from consideration or can result in dismissal at a later time.

SIGNATURE

DATE