



CASA

Court Appointed Special Advocates
FOR CHILDREN

2E. Main St. Suite 102 ♥Norwalk, OH 44857

Phone: (419) 663-2525 Ext. 235♥Fax: (419) 663-0944♥Email: casa@accnorwalk.com

Name _____

Date of Birth _____

Address _____

Soc. Sec. # _____

_____ city zip

Gender: M or F

_____ Maiden Name

Race: _____

Business Address _____

Home Phone: _____

_____ city zip

Bus. Phone: _____

Approximate work hours _____

May you be called at work? Y N

List all addresses you have lived, other than your present address on back (Adult life)

Emergency Contact _____

Name of Spouse (if Married) _____

Emergency Phone # _____

Spouse's Occupation _____

e-mail: _____

How did you hear of CASA of Huron County:

Children:

Name

DOB: _____

DOB: _____

DOB: _____

Other members of Household

To what community/volunteer group do you belong? _____

Address _____ Phone _____

Offices currently held? _____

TRANSPORTATION

Do you have a valid driver's license? Yes No

Is a car available to you? Yes No

Insurance Co. _____ Liability Limits _____

Policy Number _____

EMPLOYMENT AND VOLUNTEER HISTORY

Previous volunteer work _____

Address _____ Phone _____

Job Description _____

Previous employer _____

Address _____ Phone _____

Job Description _____

EDUCATION/TRAINING/EXPERIENCE

High School Diploma Yes No

Name of School and year graduated _____

College Diploma Yes No

Name of College and years attended _____

College degree(s) held _____

Other educational/training programs completed _____

Do you have training and/or work experience in any of the following areas?

art/graphics _____

health care _____

child care _____

law enforcement _____

child development _____

mental health _____

counseling _____

news media _____

criminology _____

psychology _____

drug/alcohol abuse _____

public speaking _____

education _____

social work _____

writing _____

If yes, please describe _____

LEGAL HISTORY

Have you ever been arrested?

Yes

No

If yes, please explain _____

Have you every been involved in a juvenile court case (as an adult or child)? Yes No

If yes, explain _____

Have you ever been the subject of a child abuse investigation? Yes No

If yes, explain _____

PERSONAL REFERENCES

Please print names, addresses, zip codes, phone numbers of people who have known you for at least two years, who know you well and who can address themselves to how you relate to children/people in general, and how well you could fulfill the responsibility of a CASA. Please do not include relatives. The CASA program staff will contact the references you list.

Name _____ Relationship _____
Daytime phone _____ Length of acquaintance _____
Address _____

Name _____ Relationship _____
Daytime phone _____ Length of acquaintance _____
Address _____

Name _____ Relationship _____
Daytime phone _____ Length of acquaintance _____
Address _____

AFFIRMATION

I hereby affirm that all of the answers on this volunteer application for the Huron County CASA Program are true to the best of my knowledge. I hereby authorize the Huron County CASA Program to investigate my background and complete national, state and local background checks to determine my fitness as a potential CASA volunteer. I understand that the information requested in this application will be used only for the purpose of determining my suitability as a Court Appointed Special Advocate and that any applicant found to have been convicted of or have charges pending for misdemeanors involving a sex offense, child abuse or neglect, or related acts that would pose risks to children or the program's credibility will be terminated from the CASA program. Further, I understand that after the successful completion of my training, I will be expected to serve a minimum of one year or for as long as the child (or children) to whom I am assigned are under the court's jurisdiction. If unforeseen circumstances prevent me from fulfilling this obligation, I will submit my written resignation to the program coordinator as soon 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 volunteer. I will discuss the contents of these materials only with those persons who are parties to the case, their legal representatives, or those persons who will be consulted for their professional knowledge or expertise.

Date Signed

Signature of CASA applicant

Please also sign STATEMENT OF RELEASE on the next page and send this application to:

CASA of Huron County, Court Services Suite 102, 2 East Main St., Norwalk, OH 44857

CASA OF HURON COUNTY
Request for Investigational Background Check in the State of Ohio
(Confidential) -

To: Huron Co. Sheriff Dept.
255 Shady Lane Drive
Norwalk, OH 44857

From: CASA of Huron County
2 B. Main Street
Norwalk, OH 44857
Phone: (419) 663-2525
Fax: (419)663-0944

STATEMENT OF RELEASE

I, _____, hereby give permission for CASA of Huron County to conduct a criminal record check, motor vehicles division record check and child protective services check in connection with my application to be a volunteer advocate in the program. I understand that any information obtained will be held in strict confidence.

CASA of Huron County is committed to a policy of equal opportunity in accepting, training and assigning applicants. CASA does not discriminate on the basis of race, color, religion, national origin, ancestry, gender, or age. CASA will act in compliance with the Americans with Disabilities Act.

Applicant's Signature Date

FOR OFFICE USE ONLY — Please conduct an Ohio Criminal Record Check on:

applicant's name date of birth gender

maiden name social security number

street address city state zip code

alias or previous married names

date signature of requesting official

Has your department had any contact with this individual? Yes _____ No _____, if possible, please explain on the back of this form.

Are there any active warrants for this individual? Yes _____ No _____

Completed by: _____ Date: _____

Thank you for helping to screen volunteers who will be advocating for the abused/neglected/dependent youth of Huron County.