

Piedmont CASA, Inc.  
P.O. Box 603  
Charlottesville, VA 22902  
Phone: 434-971-7515  
Fax: 434-971-3060



**CASA**

Court Appointed Special Advocates  
**FOR CHILDREN**

PIEDMONT CASA

## VOLUNTEER APPLICATION

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

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: F \_\_\_\_\_ M \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_

Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Employer's Phone #: \_\_\_\_\_

Current Hobbies and/or Interests: \_\_\_\_\_



Do you have any experience working with children?  
(If yes, please give organization names and details)

Yes \_\_\_\_\_ No \_\_\_\_\_

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**Have you or your family had personal/professional experience with:** (If yes, please give a brief explanation)

Child abuse Yes \_\_\_\_\_ No \_\_\_\_\_ \_\_\_\_\_

Foster care Yes \_\_\_\_\_ No \_\_\_\_\_ \_\_\_\_\_

The court system Yes \_\_\_\_\_ No \_\_\_\_\_ \_\_\_\_\_

Child Protective Services Yes \_\_\_\_\_ No \_\_\_\_\_ \_\_\_\_\_

Other child service agencies Yes \_\_\_\_\_ No \_\_\_\_\_ \_\_\_\_\_

Counseling or therapy Yes \_\_\_\_\_ No \_\_\_\_\_ \_\_\_\_\_

Have you ever applied with another organization that works with children? Yes \_\_\_\_\_ No \_\_\_\_\_

Were you accepted? Yes \_\_\_\_\_ No \_\_\_\_\_ Please give name(s) of organization(s) & year:

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Have you ever applied to this or another CASA program before? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, explain:

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If married/committed: Spouse/Partner's Name \_\_\_\_\_

Please list names and ages of all of your children: \_\_\_\_\_

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**Please answer the following questions and give details and explanations if answer is yes:**

Have you ever been hospitalized for an emotional issue? Yes \_\_\_ No \_\_\_

Do you now, or have you had a drug/alcohol abuse or dependency problem? Yes \_\_\_ No \_\_\_

Do you have any kind of health impairment? Yes \_\_\_ No \_\_\_

Details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### LEGAL HISTORY

Piedmont CASA will ask all volunteers to complete a criminal records check, which will reveal any arrest, charge or conviction. Please respond to the following questions so that your history can be discussed and evaluated.

**If you answer yes to any of the following questions, please offer an explanation in the space provided below.**

Have you or your family ever been involved in a legal action? Yes \_\_\_\_\_ No \_\_\_\_\_

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 are you currently on probation? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been or are you currently on parole? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been convicted of a traffic violation? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever had any DWI 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 \_\_\_\_\_

Details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please provide COMPLETE contact information for three non-family references who have known you for at least one year.**

Please do not list a relative or significant other. If possible, please list an employer or supervisor.

(1) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Fax/Email: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

(2) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Fax/Email: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

(3) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Fax/Email: \_\_\_\_\_ Relationship to you \_\_\_\_\_

**Please respond to the following:**

I am interested in working with children and families as a CASA volunteer because ...

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I feel that I can be a fair and objective advocate for a child because ...

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Any hesitations or concerns regarding my participation in the CASA program at this point are ...

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CASA volunteers give 10-20 hours a month. When would you fit this time into your schedule?

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Can you provide your own transportation in your work as a CASA volunteer?

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**EQUAL OPPORTUNITY STATEMENT – Piedmont CASA will not discriminate against any applicant on the basis of race, religion, color, gender, national origin, disability, age, marital status, sexual orientation or any other basis made illegal by the laws of the United States or of the State of Virginia.**

The following page is for statistical purposes only. Please mark the choice or choices that best describe you.

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

<u>Age of Volunteer</u>	<u>Gender</u>	<u>Marital Status</u>	<u>Education</u>
_____ 21-30	_____ Female	_____ Divorced	_____ Highschool
_____ 31-40	_____ Male	_____ Married/Committed	_____ AA/AS
_____ 41-50		_____ Separated	_____ BA/BS
_____ 51-60		_____ Single	_____ MA/MS
_____ 61-70		_____ Widowed	_____ PhD/EdD
_____ 71+			_____ Other: _____

**Ethnic Origin**

\_\_\_\_\_ American Indian/Alaska Native  
 \_\_\_\_\_ Asian/Asian-American  
 \_\_\_\_\_ Black/African-American  
 \_\_\_\_\_ Hispanic/Latino  
 \_\_\_\_\_ Native Hawaiian/Other Pacific Islander  
 \_\_\_\_\_ White  
 \_\_\_\_\_ Other: \_\_\_\_\_

**Language**

\_\_\_\_\_ Chinese  
 \_\_\_\_\_ English  
 \_\_\_\_\_ Spanish  
 \_\_\_\_\_ Other: \_\_\_\_\_

**Employment Status**

\_\_\_\_\_ Full-time  
 \_\_\_\_\_ Not Employed  
 \_\_\_\_\_ Part-time  
 \_\_\_\_\_ Retired  
 \_\_\_\_\_ Student

**How you heard about CASA**

\_\_\_\_\_ Agency/Professional  
 \_\_\_\_\_ Corporation  
 \_\_\_\_\_ Flyer  
 \_\_\_\_\_ Friend/Family \_\_\_\_\_  
 \_\_\_\_\_ Media: TV \_\_\_ Radio \_\_\_ Newspaper \_\_\_  
 \_\_\_\_\_ Religious Organization  
 \_\_\_\_\_ Unknown  
 \_\_\_\_\_ Volunteer Referral Agency  
 \_\_\_\_\_ Web  
 \_\_\_\_\_ Other: \_\_\_\_\_

## Piedmont CASA, Inc. Training Agreement

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Prospective volunteers are asked to read and sign the following training description and agreement:

### **Description:**

The initial training consists of 32 hours, 30 hours of classroom time and two hours of courtroom observation plus written homework assignments.

### **Agreement:**

1. I understand that participation in the Pre-Service Volunteer Training is required and essential and includes 30 hours of scheduled classroom time.
2. I understand that, in addition to the classroom sessions, I will be required to complete two hours of courtroom observation at the Charlottesville/Albemarle Juvenile and Domestic Relations District Court, as well as writing and reading assignments outside of the classroom.
3. Attendance: I understand that attendance at training is mandatory.
4. I am aware that the Pre-Service Training Class is a part of the screening process and that acceptance to participate in training does not guarantee that I will be sworn in as a CASA or that I will be assigned to a case. I further understand that either Piedmont CASA or I can choose to discontinue my involvement in the training/screening process at any time without further obligation on the part of either party.
5. Upon completion of training, my participation in the training process, as well as other screening material (references, criminal record check, Child Abuse/Neglect Central Registry check and DMV record check) will be reviewed for the purpose of determining my eligibility to be assigned a case as a CASA.

I understand and am willing to meet all the conditions stated above and wish to participate in the CASA Pre-Service Training.

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Signature of Volunteer

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Date

**The Undersigned acknowledges and agrees that:**

I am interested in becoming a CASA volunteer and know of no reasons why I should not be assigned to a child in the CASA program. I am aware that the children CASA serves have been abused, neglected or abandoned by adults. I do not want to be another cause of disappointment to a child, and acknowledge that I will make a commitment of at least one year to the child(ren) and case to which I may be assigned.

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

- Commit a minimum of a year to being a CASA volunteer.
- Participate in CASA's new volunteer training program.
- Participate in a minimum of 12 hours of in-service training each year.
- Visit in person with the child(ren) to whom I may be assigned.
- Prepare written reports to the court with the guidance and assistance of CASA.
- Participate and attend court hearings and meetings on a child's case.
- Comply with all Piedmont CASA Program Policies and Procedures.

**I understand that I will need to carry liability insurance on my car. I agree to maintain this minimum liability insurance throughout my program participation with CASA. I understand that I must have proof of liability insurance in my CASA file and that I am required to inform immediately the CASA staff of any motor vehicle infractions that may occur after my acceptance into the program.**

Yes \_\_\_\_\_ No \_\_\_\_\_

**I have attached with this application a proof of car insurance.**

Yes \_\_\_\_\_ No \_\_\_\_\_

**As an applicant to Piedmont CASA, I understand and acknowledge that:**

Piedmont CASA is not obligated in any way to accept me into the volunteer training program by submission of this application, and Piedmont CASA retains the right to refuse any individual. Piedmont CASA is not required to state reason(s) for non-acceptance into the program. Piedmont CASA will hold all information in the volunteer's file in strictest confidence. Such information becomes the property of Piedmont CASA.

*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 inquiries concerning my employment and character for the purpose of determining my suitability as a CASA volunteer. I further understand that by my signature on this application, I authorize Piedmont CASA to complete record checks of criminal history, the Virginia Department of Social Services Central Registry and the Virginia Department of Motor Vehicles. If I have lived in Virginia for less than five years, I will provide Piedmont CASA, Inc. a criminal record check from each state where I have resided for the last five years. \**

*I grant Piedmont CASA the authority to follow up on offenses listed above and understand that information obtained may preclude me from becoming a Piedmont CASA volunteer. I understand that conviction or 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 the CASA program's credibility are grounds to reject my application. All information will be held in strictest confidence.*

*Having considered the opportunities and responsibilities involved, I offer my services as a Court Appointed Special Advocate for the 16<sup>th</sup> District Juvenile and Domestic Relations District Courts and agree to follow all guidelines set forth by Piedmont CASA, Inc. Specifically, I will keep all information and knowledge acquired during my involvement with the program strictly confidential.*

*Criteria used in the selection of volunteers will be such as to insure that the individual is able to meet the responsibilities of a Court Appointed Special Advocate.*

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

*\*CASA volunteer applications will be rejected if the applicant refuses to sign the appropriate releases of information for criminal, DSS Central Registry and Division of Motor Vehicle record checks.*

**Piedmont CASA Disclosure Statement and Authorization for Alternate  
Background Search**

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Last Name

First Name

Middle Name

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Date of birth

Social Security Number

For the purpose of my continued service with Piedmont CASA, I authorize Piedmont CASA, Inc. to request a background check report on me using the Choicepoint system. I understand that this check will include, but not be limited to, background checks using:

- **National, regional and state database searches (with or without National Sex Offender Registry search included)**
- **Federal and county courthouse searches**

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Signature

Date