

| Name: | | laiden Name: | Phone Number: |
|--------------------------|--|--------------|-------------------------|
| Address: | | | |
| Date of Birth: | of Birth: Social Security Number: Email Address: | | Address: |
| Emergency Contact: | Relationship: | | Phone Number: |
| Address: | | | |
| EMPLOYMENT | | | |
| Employer: | Phone Number: | May W | /e Contact You at Work? |
| Address: | | | |
| Write a Brief Descriptio | n of Your Work: | | |
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| EDUCATION | | | |
| Highest year of school c | ompleted: | | |
| Are you presently attend | ding school? | | |
| Will you receive academ | nic credit for your CASA volunteer w | ork? | |
| Do you speak a language | e other than English? | | <u> </u> |
| If yes, specify wh | nich language and proficiency | | |





| AVAILABILITY | | | | | | |
|--------------------|---|----------------------------|-------------------------------------|--|--|--|
| Are you willing to | commit to one year of volun | teer service? | | | | |
| How many hours | How many hours per week are you available? | | | | | |
| What days and ho | ours of the week are you avail | lable? | | | | |
| Do you have a va | lid driver's license? | State of Issue: | License # | | | |
| Do you have acce | ess to a car? | | | | | |
| | eer you will be required to at eyour schedule to attend the | _ | he children you represent. Will you | | | |
| REFERENCES | Please do not list family i | members | | | | |
| NAME | EMA | AIL ADDRESS | PHONE NUMBER | | | |
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| 2 | | | | | | |
| 3 | | | | | | |
| QUESTIONS | Please use a separate she | eet of paper if you need a | idditional space | | | |
| Why do you wan | t to become a CASA Voluntee | r? | | | | |
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| How did you lear | n about the CASA program? | | | | | |
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| What do you hop | pe to get out of this volunteer | experience? | | | | |
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| Briefly explain your philosophy of parenting, including rights and responsibilities of both parents and | | |
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| children. | | |
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| List your current and previous volunteer work: | | |
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| 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. | | |
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| 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.) | | |
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| escribe any strong interests, knowledge areas, hobbies or special skills that you could offer as a olunteer. lave you ever been convicted of a crime? YES NO If yes, please describe: |
|--|
| olunteer. |
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| |
| ave you ever been convicted of a crime? YES NO If yes, please describe: |
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| you now or have you ever had allegations made against you with regards to child abuse and/or |
| eglect? YES NO If yes, please describe: |
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| AUTOBIOGRAPHY | | | | |
|--|--|--|--|--------------|
| Please write a one page autobiography. | | | | |
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1906 Knob Creek Rd. Suite 4 Johnson City, TN 37604

BACKGROUND CHECK/CONFIDENTIALITY/ EXPECTATIONS

| , | ending for a felony or misdemeanor involving a sex offense, uld pose risks to children or the CASA program's credibility is |
|--|--|
| l, | , hereby affirm that all of the answers provided on my rize the CASA program and any law enforcement agency they termine my fitness as a potential volunteer. |
| determining my suitability as a CASA volunteer guarantee that I will be assigned a case. If I have requirements, and it has been determined that expected to serve a minimum of one year in the from fulfilling this obligation, I will submit my value as possible. I am aware of the sensitive other material I will examine in my capacity as | this application will be used only for the purpose of r. Further, I understand that completion of training does not we successfully completed the training and have met all other t I am a suitable volunteer, I understand that I will be ne CASA program. If unforeseen circumstances prevent me written resignation to the program with as much advance and confidential nature of the official documents, reports and a CASA volunteer. I will discuss these matters only with with those who will be consulted for their professional |
| goals, and/or philosophy of the CASA of North | mes apparent that my activities are contrary to the policies, east Tennessee program and their desire to provide quality ervices as a CASA candidate or CASA volunteer will be termi- |
| • • | e true, complete, and correct to the best of my knowledge. In can disqualify me from consideration or can result in |
| Signature | |
| Please Return Application To: | |
| CASA of Northeast Tennessee | |
| P.O. Box 1021 | |
| Johnson City, TN 37605 | |



