

FERRY COUNTY CASA VOLUNTEER APPLICATION

(Please Print)

Name

Address

City

State

Zip

Home Phone Number

Work Phone Number

Fax Number

Email

Are you employed?

Yes

No

If Yes

Full Time

Part-Time

Place of Employment

Position

May you be called at work?

Yes

No

Social Security Number

Driver's License Number

Expiration Date

Race/Ethnic Origin

Date of Birth

In case of emergency please call: _____

Education: Circle highest completed)

High School: 9 10 11 12

College: 1 2 3 4

Graduate: 1 2 3 4

Major

Degree

Do you have any training or
experience in any of

Medicine

Psychology

Child Care

Education

News Media

Writing

Art

Mental Health

Drug or Alcohol

Abuse programs

Child Welfare

Criminology

Advertising

Graphic Design

Counseling

Child Development

Social Work

Law Enforcement

Public speaking

Fund raising

List your community activities and memberships in clubs, religious and professional groups and other organizations:

Languages spoken: _____

Hobbies/Special Interests: _____

Have you ever been arrested? Yes No If yes, on what charge? _____

Have you ever been CONVICTED of any crime? If so, list specific offenses and dates. Include traffic crimes, such as DUI, driving while suspended, and reckless or negligent driving.

Offense	_____	Date:	_____
Offense	_____	Date:	_____
Offense	_____	Date:	_____

Are you prepared to complete 30 hours of pre-service training; and, a minimum of 12 hours per year of in-service training: Yes No

Does your schedule permit you to attend meetings, court hearings or foster care reviews during the work week? Yes No

What do you feel are the strengths and weaknesses that you bring to this program?

Please describe any personal or professional experiences you have had which involved child abuse or neglect, the Department of Children and Family Services, Child Protective Services, the Juvenile Court system, foster care, or other agencies offering services to children:

Write a brief statement on why you have chosen to work with the CASA program at this particular time in your life. (Use additional paper and submit with application.)

PART TWO

Please answer the following questions in **paragraph form** on a separate piece of paper.

- 1 Write a short summary about your interest in volunteering and how you hope to benefit from the volunteer experience.
- 2 Briefly explain what led to your decision to apply for a position in the CASA program?
(What attracted you to this particular program?)
- 3 Briefly explain your philosophy of parenting, including the rights and responsibilities of both parents and children.
- 4 Briefly explain what role you believe society should play in:
 - a. protecting the rights of children
 - b. helping a family overcome hardships and remain living together as one unit.
- 5 Please write a one page autobiography.

PLEASE RETURN YOUR COMPLETED APPLICATION AND ESSAYS TO:

Valerie MacIntyre, Program Director
Ferry County CASA/GAL
350 E. Delaware Ave
Republic, WA 99166

509-775-5225 ext 3151

EMAIL: fccasa@co.ferry.wa.us

AUTHORITY TO RELEASE INFORMATION

To Whom it may concern:

I hereby authorize Ferry County CASA/GAL to conduct an investigation on my background in conjunction with the program guidelines which includes a CPS background check, social security authenticity check and sex offender registry check.

I further authorize any law enforcement agency to conduct a criminal records check and to release the results of said criminal records check to the Ferry County CASA/GAL program.

This release is executed by me with the full knowledge and understanding that the information to be obtained about me is for official use of the Ferry County Court Appointed Special Advocates (CASA)/Guardian at Litem

I have read the above waiver and release statement and fully understand what rights I am waiving by signing this document.

SIGNATURE

DATE

FULL NAME;

SEX

Race/Ethnic

PREVIOUS NAMES (MAIDEN, ETC.)

SOCIAL SECURITY NUMBER

DRIVER'S LIC. NO

DATE OF BIRTH

CURRENT ADDRESS;

PREVIOUS ADDRESS(ES) FOR THE PAST TEN (10) YEARS

