



CASA FOR CHILDREN OF KLAMATH COUNTY

731 Main St., Suite 202
Klamath Falls, OR 97601
Phone: (541) 885-6017
Fax: (541) 884-9310

APPLICATION FOR COURT APPOINTED SPECIAL ADVOCATE

Personal Information

Name: _____
(Last) (First) (Middle Initial) (Nick Name)

Address: _____
(Street) (City) (State) (Zip Code)

Home Phone: _____ Best Time to Call: _____

Work/Cell: _____ E-Mail: _____

Maiden Name: _____ Social Security Number: _____

Other Previous Names (if applicable): _____

Marital Status: Single Married Widowed Separated Divorced Partner

Spouse or Partner's Name: _____

Emergency Contact Name: _____ Phone: _____

Do you drive? Yes No Do you have access to a car? Yes No

Drivers License Number and State: _____ Military Status: _____

Date of Birth: _____ How long have you lived in this area? _____

Previous address if less than 5 years in County: _____

Are you bilingual? Yes No Ethnic Background: Caucasian Native American
Black Hispanic Asian Other

How did you hear about CASA? Radio TV Newspaper Presentation Newsletter
Community Mailer Friend Who? _____ Other (Please specify.) _____

Availability

Are you willing to commit to 2 years of volunteer service? Yes No

How many hours per week are you available? _____

What days and hours of the week are you available? _____

As a CASA 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

Educational Background

Do you have a high school diploma? Yes No Do you have a GED Certificate? Yes No

Date received: _____ Highest grade completed: _____

Please list any schools or training received after high school:

Place	Date	Type	Certificate or Degree

Skills

Volunteering: Have you ever volunteered in the past? Yes No If yes, list below:

Advocate. How do you define the word *advocate*?

Commitment. Please describe what the word *commitment* means to you.

Confidentiality. CASA volunteers are required to keep all information about their case confidential. How will you handle your family and friends' desire to know what you are doing on a case when you can't tell them?

Professionalism. As a CASA, you carry out an objective examination of the situation, working with a variety of agencies, attorneys and family members. There may be difficult issues that arise as you work on your case. What kinds of people bother you or make you angry? How do you deal with these people?

Diversity. Appreciating and understanding diversity, cultural sensitivity, and culturally appropriate advocacy for the children and families with whom the CASA program works are critical skills for volunteers. Have you ever had a negative experience working with someone from a different cultural, ethnic, political, racial, religious or economic background? Please explain:

Skills Continued

Writing: CASA volunteers write reports for the court.

1. Have you had any writing experience? Yes No
2. Do you know how to use and do you have access to a computer? Yes No
3. Do you know how to use e-mail? Yes No

Work Experience

Beginning with your present job, please describe your work experience for at least the past five years. May we contact your employer(s)? Yes No

Employer: _____ Address: _____

Job Title: _____ Duties: _____

Supervisor's Name/Title: _____ Phone: _____

Employer: _____ Address: _____

Job Title: _____ Duties: _____

Supervisor's Name/Title: _____ Phone: _____

References

Personal or Professional References. Please list at least 4 (four) references below.

NAME	ADDRESS REQUIRED (include zip code)	TELEPHONE
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____

Criminal History Check

Have you ever been arrested? Yes No If yes, where? _____

When? _____ Charge? _____

Conviction? _____ Sentence? _____

Do you presently have any court action pending? Yes No If yes, explain: _____

Child Welfare History Check

Have you ever had any involvement with the Department of Human Services/Child Welfare in the State of Oregon or any other state?

Yes No If yes, please explain and give dates and county where information is filed:

Do you presently have a child welfare case pending? Yes No If yes, explain: _____

I hereby authorize CASA for Children of Klamath County, Klamath County Sheriff’s Office and the Department of Human Services, through the FACIS Program, to investigate and obtain any and all information concerning my criminal and driving record (whether same is of record or not), and I hereby release all persons, whomever, from any charge due to furnishing said information.

FINGERPRINTING OF ALL APPLICANTS IS A SCREENING REQUIREMENT OF THE PROGRAM.

I hereby waive any right that I may have now or in the future to review any letter of reference submitted by references I have given. I understand that, once signed, this agreement is irrevocable.

I understand that any misrepresentation on the CASA application form, particularly the Criminal History Check and Child Welfare History Check, may be cause for disqualification or dismissal of my volunteer work.

Signature _____ Date _____

Nondiscrimination Policy

In compliance with Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, Title II, the Age Discrimination Act of 1975, and the Americans with Disability Act of 1990, it is the policy of CASA for Children of Klamath County that no person shall on the basis of race, color, religion, national origin or ancestry, sex, age, disability, weight, or marital status be excluded from participation in, be denied benefits of, or be subjected to discrimination during any program or activity in employment.

Please return application in person, by FAX, or by mail to:

**CASA for Children of Klamath County
731 Main Street, Suite 202
Klamath Falls, OR 97601
www.klamathfallscasa.org**