



Dear Applicant,

Thank you for expressing an interest in volunteering your time with CASA of the Permian Basin Area. This involvement can be a challenging and rewarding experience through which you have a unique ability to better the life and outcome of an abused child.

CASA of the Permian Basin Area is a non-profit organization that is dedicated to advocating on behalf of abused and neglected children. As a CASA volunteer, you speak up for the best interests of an abused or neglected child in court. CASA volunteers are appointed by the court to serve as Guardian Ad Litem for the children and are responsible for recommending the best possible outcome for the child.

The role of a Volunteer for this agency can be a very demanding task. For this reason, we think that it is important for each Volunteer applicant to have a clear understanding of the role and the extent of the commitment involved. A few of the role expectations are listed below and we hope that after reviewing this list you will be able to make a meaningful commitment for yourself and CASA.

Some of the role requirements include:

- † Volunteers must be at least 21 years old
- † Volunteers must successfully pass an extensive criminal and CPS background check
- † Volunteers are asked to commit to a minimum one-year term as a volunteer
- † Volunteers must participate in and successfully complete a 30-hour pre-service training
- † Volunteers must partake in 12 hours of ongoing training per year
- † Volunteers cannot serve as foster, foster/adopt or adoptive parents for any child whose conservatorship is through CPS unless volunteer is related to the child

If you believe you are willing and able to fulfill the above-mentioned requirements and are ready to make a positive impact on the life of an abused child, please fill out the attached application and submit it to our office. Once we receive your completed application, we will contact you to set up an interview in order to get to know you better and to provide you with the opportunity to learn more about our program and your possible involvement with the CASA organization. In the meantime, if you have any questions, please contact me at (432) 498-4174. We look forward to hearing from you!

Sincerely,

Heather Dunn

Volunteer Coordinator

heather@casapba.org

432-498-4174

CASA of the Permian Basin Area



Volunteer Application

Today's Date _____

How did you hear about CASA? _____

Full Name: _____

Home Address: _____

County _____

Social Security Number _____

Home Phone _____ Cell Phone _____

Email _____

Any areas lived in the past 5 years:

Employment History:

Employment Status: _____

Place of Employment: _____

Employment Address: _____

Position: _____

Do you have an understanding with your employer or supervisor for reasonably flexible time?

Yes No

Emergency: _____

Phone: _____

Your Gender: Male Female

Date of Birth: _____

Ethnicity: African-American Asian-American Caucasian
 Hispanic Native American Other: _____

What is your primary language? _____

Do you speak another language? _____

Education: _____

Marital Status: _____

Name of Spouse: _____

Do you drive? _____

Do you have access to a car? _____

Driver's License # _____

Car Insurance Co. _____

Policy # _____

Do you agree to maintain minimum liability insurance throughout your program participation?

Yes No

Do you have experience working with children? Yes No

If yes, please explain (give type of activity/ages of children/professional or volunteer).

Do you have any personal or professional experience with the following (please explain)?

Child Abuse: Yes No

Foster Care: Yes No

Child Protective Service: Yes No

Criminal, Juvenile or Family Court System: Yes No

Other child service agencies: Yes No

Please complete all questions and give details as needed:

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

Were you accepted: Yes No

Name of Organization: _____

What were your responsibilities?

Please list other volunteer experiences: (give name & date involved)

Have you ever applied to this or any other CASA in the past two years?
 Yes No

If yes, when and where?

Present membership in clubs or organizations (include offices held):

Have you or any member of your family ever been involved with a case that was heard in the County District Courts?

Yes No

If yes, please explain and give dates and names:

Have you or anyone in your household ever been charged and/or convicted of a misdemeanor?

Yes No

If yes, please explain:

Have you or anyone in your household ever been charged and/or convicted of a felony?

Yes No

If yes, please explain:

Have you or anyone in your household ever been or are you currently on probation and/or parole?

Yes No

If yes, please explain:

If yes, state offense for probation/parole and give starting and ending dates:

Have you ever been convicted of a traffic violation?

Yes No

If yes, please explain:

Any DWI/DUI arrests or convictions?

Yes No

If yes, please explain:

Have you ever had your license revoked or suspended?

Yes No

If yes, please explain:

Do you now or have you ever had a chemical or alcohol dependency/abuse problem?

Yes No

If yes, please explain:

Are you now or have you ever had treatment for chemical or alcohol dependency/abuse?

Yes No

If yes, please explain:

Do you have any kind of health impairment?

Yes No

If yes, please explain:

Have you ever been charged or convicted of sexual misconduct (including pornography)?
 Yes No

If yes, please explain:

As a CASA volunteer, will you be willing to:

Commit a minimum of one year to being a CASA?
 Yes No

Attend all hearings and meetings on your case when they are scheduled?
 Yes No

Participate in CASA's initial training program of about 30 hours?
 Yes No

Participate in in-service training with CASA at least 12 hours a year?
 Yes No

Visit with child(ren) monthly in their placements?
 Yes No

Complete monthly contact logs?
 Yes No

Participate in fact finding, monitoring, and report your knowledge orally and in written form to the court?

I am interested in becoming a CASA volunteer and know of no reason I should not be assigned a case in the program. I am aware that the children in the program have been abused, neglected, and/or abandoned by adults and I do not want to be another disappointment to them. Therefore, I will commit to a minimum of one year of service to my case.

The undersigned acknowledges and agrees that:

1. He/she is *not* obligated, if called upon, to accept a case herein applied for, and that
2. CASA is *not* obligated to assign or actively seek to assign him/her to a case, and that
3. As a part of CASA's policy, additional personal information will be gathered during the pre-interview process, and that

4. CASA retains the right to refuse any individual that it feels would not be in the best interest of the program and, further, CASA is not required to state the reason(s) for non-acceptance, and that
5. He/she is a volunteer and can resign from the program at any time without prior notice, and that
6. CASA can terminate a volunteer's service at any time without prior notice, and that
7. The volunteer's file is held in the strictest confidence and becomes the property of CASA of the Permian Basin

I give my permission to CASA of the Permian Basin to release information about my experience as a CASA volunteer to any other CASA program to which I may apply in the future.

I have truthfully responded to all of the questions on this application.

Applicant's Signature

Date

It is the policy of CASA of the Permian Basin to implement affirmatively equal service to all clients without regard to race, religion, sexual orientation, gender or national origin. CASA of the Permian Basin selects volunteers without regard to race, religion, sexual orientation, age, gender, national origin or disability.

PERSONAL REFERENCES

Please list three references – **NO RELATIVES!** You MUST provide all of the information requested below or your file will not be complete.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Email: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Email: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Email: _____

APPLICANT AGREEMENT

I fully understand that completion of this form is only part of the application process and does not assure acceptance as a CASA of the Permian Basin volunteer. **I understand that I must participate in an in-person interview before being accepted into the training program.** I understand that a criminal record check will be completed through the Texas Department of Protective and Regulatory Services and national and local law enforcement agencies. I understand that any written or oral misrepresentation in making this application is just cause for dismissal from consideration of participation in the program.

Signature: _____ **Date:** _____

Confidential Release for Background Check

I hereby give CASA of the Permian Basin, permission to do a background check including criminal records, child abuse records, employment records, driving history and references.

I authorize any city, county, state or federal law enforcement agency to release information found in criminal records to CASA of the Permian Basin.

I understand that this procedure is part of the standard screening for persons who volunteer services or are employed with CASA of the Permian Basin.

Volunteer Signature **Date**

PLEASE COMPLETE THE FOLLOWING INFORMATION

Name: _____

Date of Birth: _____

Social Security Number: _____

Texas DL#: _____

Previous DL# (if in Texas 3 years or less): _____

**PERMISSION TO ALLOW CASA PROGRAM TO REQUEST
CHILD ABUSE/NEGLECT
CENTRAL REGISTRY and DPS CRIMINAL HISTORY CHECK**

Purpose

The purpose of this form is to grant authorized representatives of CASA programs permission to request through the Texas Department of Family and Protective Services (DFPS) a Central Registry of Child Abuse and Neglect check as well as a criminal history check from the Texas Department of Public Safety (DPS) on the behalf of potential and current CASA volunteers, employees and board members.

Central Registry check

As required by the Texas Family Code 261.002, DFPS maintains a central registry of reported cases of child abuse and neglect. The DFPS Central Registry consists only of information gathered during Child Protective Services, Child Care Licensing, and Adult Protective Services facility investigations of child abuse and neglect in cases which were given a disposition of "reason to believe", and the person had a role of designated perpetrator or sustained perpetrator (**Please Note:** Cases involving adult victims are not included in the DFPS Central Registry).

In addition, the person will not clear the Central Registry check if the person is involved as an alleged perpetrator in an open child abuse or neglect investigation being conducted by DFPS. A new Central Registry check may be requested at the conclusion of the investigation to determine if the person has been listed as a designated perpetrator on the Central Registry of Child Abuse and Neglect.

Criminal History check

The criminal history check from DPS will include all Texas based arrests and dispositions, including both convictions and cases with unknown dispositions. In some cases the search will produce juvenile criminal history results. Unknown disposition information found may not be the most up to date information available. In order to determine the final disposition, contact must be made with the county prosecuting the case, or with the DPS Error Resolution Unit (512-424-7256).

Process

A signed copy of this form will be submitted to DFPS on your behalf. Providing false information on the form or any updated information requested for future submissions to DFPS is a violation of Texas Penal Code Section 37.10. The information on this form will be used to conduct the DFPS Central Registry and criminal history checks.

Results

As the subject of the request, you have the right to review the results of this check. If Central Registry history is found that identifies you as a person who has been found to have abused or neglected a child, DFPS will only send the results directly to you via mail or e-mail. You have the option to share these findings with the CASA representative who submitted the request on your behalf. If you want to continue to be considered as a potential volunteer, employee, or board member with CASA you will be required to disclose the findings.

**PERMISSION TO ALLOW CASA PROGRAM TO REQUEST
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REQUIRED IDENTIFYING INFORMATION ON SUBJECT OF REQUEST - The requester must provide all of this information in order for a check to be made:

First Name		Middle Name	Last Name		
Other names or spellings used (married, maiden, alias, etc.) - First, Middle, Last (continue on back as needed)					
E-mail Address (optional)					
Residence Street Address			City	County	State Zip Code
Residence Telephone No. (A/C)	Date of Birth	Gender : <input type="checkbox"/> Male <input type="checkbox"/> Female		SSN	
Race (check all applicable)		Ethnicity (check one, only)			
<input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other		<input type="checkbox"/> Hispanic <input type="checkbox"/> Not Hispanic <input type="checkbox"/> Unable to Determine			
List all addresses you have resided in <u>Texas</u> :					

I am the person listed above. The information in this document is correct and I am a prospective or current volunteer, employee or board member of a court appointed special advocate (CASA) program. I agree to update the CASA program of any changes to the information above.

I grant permission to the CASA program to request a Child Abuse/Neglect Central Registry and a Texas Department of Public Service Criminal history check as well as any subsequent checks so long as I am active with the CASA program.

I understand that the information I am providing will be part of any request and that providing false information is a violation of Texas Penal Code Section 37.10.

Signature: _____

Date of Consent: _____