



CASA of Kay and Noble Counties

2203 North Ash Street Ponca City, OK 74601

Phone: 580-762-8341 Fax: 580-762-9967 email: kaynoblecasa@sbcglobal.net www.kaynoblecasa.org

Volunteer Application

Thank you for your interest in becoming a CASA volunteer with CASA of Kay and Noble Counties. Your commitment can make an enormous difference in the life of an abused child. Please fax or mail your completed application form to CASA of Kay and Noble Counties. Upon receipt of your application, a representative will contact you to discuss the program/position details and arrange an interview.

PERSONAL INFORMATION				
Last Name	First Name	MI	Email address	
Present Address		City	State	Zip
Home Phone		Other Phone	Best time to contact you	
DOB	Age	Emergency Contact	Phone	Relationship
How did you hear about CASA of Kay and Noble Counties?				
Please describe any previous or present experience that will assist you as a CASA volunteer <i>Please use an addition sheet of paper if you need additional space:</i>				
Please describe any strong interests, knowledge areas, hobbies or special skills that you could offer as a CASA volunteer <i>Please use an addition sheet of paper if you need additional space.:</i>				
Have you ever been arrested or convicted of a misdemeanor or felony, placed on probation, or given a suspended sentence in court? Include any arrests or convictions by military trial, and any charges for which you are awaiting trial.				
Yes No	If yes, please explain:			
Do you have any health issues or physical conditions that should be noted?				
Yes No	If yes, please explain:			
Do you have any mental health issues (current or past)?				
Yes No	If yes, please explain:			
Do you have any substance abuse issues (current or past)?				
Yes No	If yes, please explain:			
Please describe any experience you or your family have had with social service agencies as a staff person, foster parent, foster child, volunteer, or client. <i>Please use an addition sheet of paper if you need additional space:</i>				
Current Employer		Phone Number	MAY WE CONTACT YOU AT WORK? YES NO	
Briefly describe your work				
Will you be able to arrange your schedule to attend hearings? (3-4 per year, usually on Mondays) Yes No				
Education High School Some college Associates Bachelor Masters Doctor				Major/Area of Study
Are you currently a student? Yes No		Do you speak a language other than English? Yes No		If yes, which language?
Do you have a valid driver's license? Yes No		Do you have access to a car? Yes No		Please attach a copy of driver's license and proof of insurance.
Are you willing to commit to one year of service? Yes No				

References

Please list six references (no more than one relative, please)

Name	Address	Phone Number
1.		
2.		
3.		
4.		
5.		
6.		
7. (optional)		
8. (optional)		

Background Check

Any applicant found to have been convicted of or having charges pending for a felony or misdemeanor involving a sex offense, child abuse or neglect, or related acts that would pose risks to the children or the CASA of Kay and Noble Counties Program's credibility is not eligible to be a CASA volunteer.

I, _____ hereby affirm that all of the answers provided on my volunteer application are true. I hereby authorize CASA, Inc., and any law enforcement agency they authorize, to investigate my background to determine my fitness as a potential volunteer.

I understand that the information requested in this application will be used only for the purpose of determining my suitability as a CASA volunteer. Further, I understand that completion of training does not guarantee that I will be assigned a case. If I have successfully completed the training and have met all other requirements, and it has been determined that I am a suitable volunteer, I understand that I will be expected to serve a minimum of one year in the CASA program. If unforeseen circumstances prevent me from fulfilling this obligation, I will submit my written resignation to the program director with as much advance notice as possible. I am aware of the sensitive and confidential nature of the official documents, reports and other material I will examine in my capacity as a CASA volunteer. I will discuss these matters only with those persons directly involved in the case or who will be consulted for their professional knowledge and expertise.

I also understand that if for any reason it becomes apparent that my activities are contrary to the policies, goals and/or philosophy of the CASA program and their desire to provide quality services to abused and neglected children, my services as a CASA volunteer will be terminated.

I submit the statements on this application are true, complete, and correct to the best of my knowledge. I understand that falsification on this application can disqualify me from consideration or can result in dismissal at a later time.

Your Signature _____ Date _____