



Office Use Only
Reviewed By: _____

Volunteer Application

Applicant Information

Full Name: _____ Date: _____
Last First Middle

Preferred Name: _____ DOB: _____

Address: _____
Street Address Apartment/Unit #

_____ *City State Zip Code*

Phone: _____ Email Address: _____

Marital Status: _____ Spouse's Name: _____

Number of Children, Ages: _____

Are you a citizen of the United States? YES NO Do you have regular access to a car? YES NO
Do you speak a 2nd language? YES NO

Please List all states you have lived in for the past seven years: _____

CASA may conduct National Criminal Background, DCS Database, Sex Offender and Drug Offender Registry Checks. Is there anything that could be a potential concern during any of these? YES NO

If yes, please explain: _____

Do you know of any reason(s) a judge might be reluctant for you to serve as a CASA Advocate? YES NO

If yes, please explain: _____

CASA case assignments often last between six and twenty-four months. YES NO
Are you able to commit to at least 12 months of service?

While CASA staff is always available to cover court dates and meetings, we ask that your schedule has room for flexibility. Are there any YES NO
scheduling concerns you foresee?

If yes, please provide days/times that you are NOT available: _____



Education

High School: _____ City/State: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ City/State: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ City/State: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Employment History

(Please provide history for the last ten years of employment. Use separate sheet if necessary)

Company: _____ Job Title: _____

Address: _____ Phone Number: _____

Supervisor: _____ May we contact them for a reference? YES NO

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

Company: _____ Job Title: _____

Address: _____ Phone Number: _____

Supervisor: _____ May we contact them for a reference? YES NO

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

Company: _____ Job Title: _____

Address: _____ Phone Number: _____

Supervisor: _____ May we contact them for a reference? YES NO

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____



References

Please provide three professional, or character, references (no family members)

1. Full Name: _____ Relationship: _____
Phone Number: _____ Email Address: _____
 2. Full Name: _____ Relationship: _____
Phone Number: _____ Email Address: _____
 3. Full Name: _____ Relationship: _____
Phone Number: _____ Email Address: _____
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Emergency Contacts

- Emergency Contact #1* Name: _____ Phone Number: _____
- Emergency Contact #2* Name: _____ Phone Number: _____
- Emergency Contact #3* Name: _____ Phone Number: _____
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Community Involvement/ Relevant Experience

List all experience working and volunteering with children:

List all community activities you participate in (i.e. Organization Name, Dates Involved, Role/Responsibilities):



Affirmation of Suitability and Authorization to Release Information

I hereby affirm that all my answers provided on my volunteer application are true. I hereby authorize CASA of Maury County, Inc to investigate my background to determine my fitness as a potential volunteer. I understand that the information requested in this application will be used exclusively for determining suitability as a CASA volunteer and shall be held in confidence.

If unforeseen circumstances prevent me from fulfilling my obligation to the CASA program, I will submit my written resignation to the program with as much advance notice as possible. I am aware of the sensitive and confidential nature of the official documents, reports, and other materials I will examine in my capacity as a CASA volunteer. I will discuss the matters only with those persons directly involved in the case or who will be consulted for their professional knowledge and expertise.

I hereby authorize CASA of Maury County, Inc to obtain information concerning my suitability to become a volunteer for this agency from the Department of Children's services, the Sexual Abuse registry, the Department of corrections, the District Attorney's office, juvenile, civil, and criminal court, the Methamphetamine Abuse registry, the Department of Motor Vehicles and or police/sheriff records, and a verification of valid social security number. This release is executed by me with the full knowledge and understanding that the information to obtained about me is for the official use of the CASA program. I also understand that my refusal to sign this waiver and release statement makes me automatically ineligible to serve as a CASA volunteer.

I hereby certify that I have had no arrests or convictions resulting from a criminal offense (excluding traffic violations) nor is there any criminal action or investigation pending. I further certify that I have had no convictions or charges pertaining to child abuse or child neglect.

I understand that, in accordance with National CASA and Tennessee CASA standards, CASA of Maury County, Inc must reject any volunteer applicant whose criminal records check shows a conviction for or pending charges for sexual offenses, child abuse or neglect, or related acts that pose a risk to children or to the credibility of CASA of Maury County, Inc as a community service agency.

I have read and fully understand that above waiver and release statement.

Signature: _____

Date: _____

Printed Name: _____

(Please provide a copy of your valid Tennessee Driver's License and current Proof of Insurance)

Please return your completed application to information@casaofmaurycounty.org

Or

Mail to CASA of Maury County, Inc.
22Public Square, Suite 2
Columbia, TN 38401

Phone: (931) 381-4733 Fax: (931)381-3111