

CASA of Central Virginia  
**Volunteer Application**  
Rev. 2/19/20



**Important Application Instructions:** Please fully complete the application below, indicating N/A for any sections that do not apply. This application must be typed. Handwritten applications will not be accepted.

**Date of Application:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Date of Info Session Attended:** \_\_\_\_/\_\_\_\_/\_\_\_\_  
*Note: You **must** attend an information session within 12 months of applying.*

**Which upcoming training class you are available to attend?** ☐ Winter/Spring ☐ Summer ☐ Fall

**Which localities would you prefer to work?** (Please rank them in order with #1 being most preferred)

\_\_\_\_Amherst \_\_\_\_Appomattox \_\_\_\_Bedford \_\_\_\_Campbell \_\_\_\_Lynchburg \_\_\_\_Nelson

## Contact Information

**Full Name:** \_\_\_\_\_  
*First Middle Last*

**List any and all names by which you have been known (nicknames, previous married names):**

**Home Address:** \_\_\_\_\_ **Apt #:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Cell Phone #:** (\_\_\_\_)\_\_\_\_-\_\_\_\_ **Home Phone #:** (\_\_\_\_)\_\_\_\_-\_\_\_\_

**Work Phone #:** (\_\_\_\_)\_\_\_\_-\_\_\_\_ **Email:** \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_ **Emergency Phone:** (\_\_\_\_)\_\_\_\_-\_\_\_\_

## Demographics

**Gender:** ☐ Female ☐ Male **Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Race:** ☐ Caucasian ☐ African American ☐ Native American ☐ Asian ☐ Multi-racial

**Ethnicity:** ☐ Hispanic/Latino ☐ Not Hispanic or Latino

**Primary Language:** ☐ English ☐ Spanish ☐ French ☐ ASL ☐ \_\_\_\_\_

**Do you speak another language?** ☐ English ☐ Spanish ☐ French ☐ ASL ☐ \_\_\_\_\_

## Education

*Please list all that are applicable.*

**High School (or GED):** \_\_\_\_\_  
*School Name DATES ATTENDED*

**College:** \_\_\_\_\_  
*School Name DATES ATTENDED Major/Degree Earned*

**Graduate School:** \_\_\_\_\_  
*School Name DATES ATTENDED Major/Degree Earned*

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## Employment

**What is your employment status?** ☐ Retired ☐ Full-Time ☐ Part-Time ☐ Student ☐ Unemployed

**Current Employer:** \_\_\_\_\_ **Position:** \_\_\_\_\_

Description of your work: \_\_\_\_\_

Work Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Dates of Employment: From \_\_\_\_/\_\_\_\_/\_\_\_\_ to now.

**Previous Employer:** \_\_\_\_\_ **Position:** \_\_\_\_\_

Description of your work: \_\_\_\_\_

Work Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Dates of Employment: From \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

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## Volunteer Experience

**What are your current community volunteer activities and interests?** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Would you have 3-5 hours per week to devote to this role of volunteer advocate?** ☐ Yes ☐ No

**Please list skills and any training you have completed that may assist you as a CASA volunteer:**

\_\_\_\_\_  
\_\_\_\_\_

**Have you ever worked with children?** ☐ Yes ☐ No **Please Explain:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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## Transportation

**Do you drive?** ☐ Yes ☐ No **Do you own a car or have regular access to a vehicle?** ☐ Yes ☐ No

**Driver's Lic. #:** \_\_\_\_\_ **Car Insurance Co.:** \_\_\_\_\_

**Do you have insurance coverage?** ☐ Yes ☐ No **Expiration Date:** \_\_\_\_\_

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## Recruitment

How did you hear about us? (Check all that apply and give us details so we know what is working!)

Friend/Family Member: \_\_\_\_\_ Recruiting event: where? \_\_\_\_\_

Brochure/Flyer: where? \_\_\_\_\_ Internet: \_\_\_\_\_

Social Media: \_\_\_\_\_ Radio: \_\_\_\_\_

Newspaper/Magazine: \_\_\_\_\_ Television: \_\_\_\_\_

☐ National CASA Website ☐ Virginia CASA Website Other: \_\_\_\_\_

How long have you been considering this volunteer role? \_\_\_\_\_

What ideas do you have for us to spread the word? \_\_\_\_\_

\_\_\_\_\_

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## References

Please list 3 references of people who know you well, other than relatives, preferably for whom you have worked in either a paid or volunteer capacity. Accurate and complete contact information (including email and mailing address) is very important in order to process your application.

### Reference 1:

**Name:** \_\_\_\_\_ **Phone #:** (\_\_\_\_)\_\_\_\_-\_\_\_\_\_

**Address:** \_\_\_\_\_ **City/State/Zip:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Relationship:** \_\_\_\_\_

### Reference 2:

**Name:** \_\_\_\_\_ **Phone #:** (\_\_\_\_)\_\_\_\_-\_\_\_\_\_

**Address:** \_\_\_\_\_ **City/State/Zip:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Relationship:** \_\_\_\_\_

### Reference 3:

**Name:** \_\_\_\_\_ **Phone #:** (\_\_\_\_)\_\_\_\_-\_\_\_\_\_

**Address:** \_\_\_\_\_ **City/State/Zip:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Relationship:** \_\_\_\_\_

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## Background Check Information

**Have you or any member of your immediate family been a party to any proceedings in the Juvenile & Domestic Relations District Courts (including custody or child support) in the 24<sup>th</sup> Judicial District (Amherst, Bedford, Campbell, Lynchburg, Nelson), or in the 10<sup>th</sup> Judicial District (Appomattox)?**

☐ Yes    ☐ No    **If so, when:** \_\_\_\_\_ **In which Court(s):** \_\_\_\_\_

**Reason:** \_\_\_\_\_

**Have you ever been the subject of a Child Protective Services (CPS) complaint?** ☐ Yes    ☐ No

If yes, please explain: \_\_\_\_\_

**Do you consent to a routine check of your criminal records?** ☐ Yes    ☐ No

*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 children or the CASA program's creditability will not be accepted as a CASA volunteer advocate.*

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## Technology

*Please check all that apply to you. If you cannot check one of these, please explain.*

- ☐ I have my own laptop or PC at home.
- ☐ I have internet access at home.
- ☐ I have my own email address that is not shared with anyone and I check it daily.
- ☐ I know how to attach documents to an email.
- ☐ I am comfortable using the internet (i.e. browsing social media, using Google to search, online shopping).
- ☐ I am comfortable using Microsoft Word or Google Docs to type letters or reports.
- ☐ I am comfortable using Microsoft Excel to fill in data.

**Comments:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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## Autobiography

*Please provide a one-page autobiography including your background and an explanation of why you would like to be a CASA Volunteer.*

**By typing my name below, I hereby certify that all statements on this application are true and correct to the best of my knowledge.**

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Please save this application to your computer and email it to [volunteer@cvcasa.org](mailto:volunteer@cvcasa.org)**

Learn more: [www.cvcasa.org/volunteer](http://www.cvcasa.org/volunteer)