

Piedmont CASA, Inc.
818 E. High Street
Charlottesville, VA 22902
Phone: 434-971-7515
Fax: 434-971-3060



ADVOCATE APPLICATION

Mail or email completed form to Kari Joyner:
kjoyner@pcasa.org

Date: _____

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Home Phone: _____ Cell: _____

Emergency Contact: _____ **Phone:** _____

Relationship: _____

Driver's License #: _____ State: _____ Date of Birth: _____

Please list all the countries and states you have lived in within the past 7 years:

Employment Status: ☐ Fulltime ☐ Part-time ☐ Retired ☐ Student ☐ Other: _____

EMPLOYMENT HISTORY:

List your last three places of employment (the first being your present employer).

NAME OF COMPANY & PHONE #	POSITION	SUPERVISOR	EMPLOYMENT DATES	REASON FOR LEAVING

PERSONAL:

Do you have professional or volunteer experience working with children? ☐ Yes ☐ No
If yes, please provide organization names and your roles(s):

Have you ever applied to this or another CASA program before? ☐ Yes ☐ No

If yes, please provide name and dates:

List any community groups or service opportunities in which you are presently active (professional associations, faith communities, service organizations, coaching, mentoring, etc.):

Are you proficient with using a computer? ☐ Yes ☐ No

If yes, do you have a computer at your disposal? ☐ Yes ☐ No

Have you or your family had personal/professional experience with: (If yes, we will talk about your experience during your interview).

Child welfare system	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Court system	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Criminal justice system	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Mental health providers	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other child service agencies	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Please provide COMPLETE contact information for three non-family references who have known you for at least one year. Please do not list a relative or significant other. If possible, please list an employer or supervisor.

1) Name:
Phone:
Email:
Relationship to you:

2) Name:
Phone:
Email:
Relationship to you:

3) Name:
Phone:
Email:
Relationship to you:

Please respond to the following:

I am interested in working with children and families as a CASA Advocate because ...

Any hesitations or concerns regarding my participation in the CASA program at this point are ...

CASA Advocates give 10-15 hours a month. Will this time fit into your schedule? ☐ Yes ☐ No

Can you provide your own transportation in your work as a CASA Advocate? *You will be asked to provide proof of liability coverage at the first training session. ☐ Yes ☐ No

EQUAL OPPORTUNITY AND ANTI-HARASSMENT STATEMENT – Piedmont CASA prohibits discrimination against, or harassment of, any employee or applicant for employment, or against any volunteer or applicant to serve as a volunteer on the basis of age, color, disability, gender identity or expression, marital status, military status (which includes active duty service members, reserve service members, and dependents), national or ethnic origin, political affiliation, pregnancy (including childbirth and related conditions), race, religion, sex, sexual orientation, veteran status, family medical or genetic information, or any other basis made illegal by the laws of the United States or of the Commonwealth of Virginia.

The following questions are for statistical purposes only. Please mark the choice or choices that best describe you.

Gender: Male Female Nonbinary

Marital Status: Married/Committed Divorced Separated Widowed Single

Education: High School Some college Undergraduate Degree Postgraduate Degree
Other

Race / Ethnicity (check all that apply):

- ☐ American Indian/Alaska Native
- ☐ Asian
- ☐ Black/African-American
- ☐ Native Hawaiian/Other Pacific Islander
- ☐ Caucasian
- ☐ Multiracial
- ☐ Hispanic/Latino
- ☐ Other

Languages Spoken (and level for 2nd language):

How did you hear about Piedmont CASA?

- ☐ Agency/Professional
- ☐ Business
- ☐ Flyer
- ☐ Friend/Family
- ☐ TV
- ☐ Radio
- ☐ Newspaper
- ☐ Religious Organization
- ☐ Volunteer Referral Agency
- ☐ Web
- ☐ Unknown
- ☐ Other:

Prospective Advocates are asked to read and sign the following training description and agreement:

- 1) I understand that participation in the Pre-Service Advocate Training is required and essential and includes 40 hours of scheduled classroom time.
- 2) I understand that, in addition to the classroom sessions, I will be required to complete two hours of courtroom observation at one of the Juvenile and Domestic Relations District Courts that CASA serves, as well as writing and reading assignments outside of the classroom.
- 3) Attendance: I understand that attendance at training is mandatory.
- 4) I am aware that the Pre-Service Training Class is a part of the screening process and that acceptance to participate in training does not guarantee that I will be sworn in as a CASA or that I will be assigned to a case. I further understand that either Piedmont CASA or I can choose to discontinue my involvement in the training/screening process at any time without further obligation on the part of either party.
- 5) Upon completion of training, my participation in the training process, as well as other screening material (references, criminal record check, Child Abuse/Neglect Central Registry check and OMV record check) will be reviewed for the purpose of determining my eligibility to be assigned a case as a CASA.
- 6) I understand and am willing to meet all the conditions stated above and wish to participate in the CASA Pre-Service Training.

As an applicant to Piedmont CASA, I understand and acknowledge that:

Piedmont CASA is not obligated in any way to accept me into the Advocate training program by accepting this application, and Piedmont CASA retains the right to refuse any individual. Piedmont CASA is not required to state reason(s) for non-acceptance into the program. Piedmont CASA will hold all information in the volunteer's file in strictest confidence. Such information becomes the property of Piedmont CASA.

I hereby certify that all statements made on this application are true and correct to the best of my knowledge. I understand that by submitting this application, I authorize inquiries concerning my employment and character for the purpose of determining my suitability as a CASA Advocate. I further understand that by my signature on this application, I authorize Piedmont CASA to complete national and state record checks of criminal history, Departments of Social Services and Departments of Motor Vehicles in every state or country in which I have resided for the last seven years.

I grant Piedmont CASA the authority to follow up on offenses reported and understand that information obtained may preclude me from becoming a Piedmont CASA Advocate. I understand that conviction or 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 credibility are grounds to reject my application. All information will be held in strictest confidence.

Having considered the opportunities and responsibilities involved, I offer my services as a Court Appointed Special Advocate for the Charlottesville/Albemarle, Louisa and Greene Juvenile and Domestic Relations District Courts and agree to follow all guidelines set forth by Piedmont CASA, Inc. Specifically, I will keep all information and knowledge acquired during my involvement with the program strictly confidential. Criteria used in the selection of volunteers will be such as to ensure that the individual is able to meet the responsibilities of a Court Appointed Special Advocate.

Signature: _____

Date: _____

****CASA Advocate applications will be rejected if the applicant refuses to sign the appropriate releases of information for criminal, DSS Central Registry and Division of Motor Vehicle record checks.***