5th Judicial Circuit CASA

Volunteer Application (print, complete and mail to: CASA, 411 Jules, B03, St. Joseph, MO 64501) The CASA Office works in an inclusive network which strives to recruit a diverse group of volunteers to advocate for the best interests of all children. Volunteers will be recruited without regard to gender, handicap, age, race, religion or other condition. Any person meeting the minimum requirements will be considered for acceptance as a volunteer.

How did you learn al	bout CASA:		
Name:			
(last)	(first)		(middle)
Address:			
Home Phone:		Work Phon	e:
Cell Phone:		E-mail:	
Date of Birth:		SSN:	
List any other State		=	sided in during the last 7
Employer:			
Address:			
Phone:	Da	ate Employed:	
Position Held:		Supervisor:	
Brief description of v	vork:		
Employment History	(last 5 years): _		

Volunteer Experiences:	
Organization:	
Address:	
Phone Number: S	Supervisor:
Briefly describe volunteer experience:	
Organization:	
Address:	
Phone Number:S	Supervisor:
Briefly describe volunteer experience:	
Education (highest year completed or degi	ree):
If you speak a foreign language, which one	ə:
Do you drive or have a dependable means	s of transportation?
Can you attend daytime hearings and mee	etings?
Can you make a commitment of at least or	ne year to being a CASA?
How did you hear about CASA?	

Why do you want to be a CASA vo	lunteer?
Personal References: (Please list 3 references, not including rel References will remain confidential.)	atives, with complete address and phone numbers.
#1 – Name:	
	Relationship:
#2 – Name:	
Address:	
Phone Number:	Relationship:
#3 – Name:	
Address:	
Phone Number:	Relationship:
	ned herein is, to the best of my knowledge, at falsification of any information may render
Signature of Applicant	 Date

5th Judicial Circuit CASA 5th Judicial Circuit Court of Missouri, Juvenile Office

Permission to Contact References And Complete Background Information

I hereby give permission to the 5th Judicial Circuit CASA Office to inquire about my qualifications and/or character by:

- Contacting personal references named on the volunteer application,
- Contacting present and/or past employers,
- Contacting volunteer organizations, I have worked with,
- Completing a background and criminal history check with the State of Missouri Family Care Safety Registry (Child Abuse/Neglect), Social Security Verification and any necessary law enforcement agency.

Information needed for background checks Last Name: _______ First Name: _______ Middle Name: _______ Race: _______ Gender: _______ Date of Birth: _______ State of Birth: _______ Drivers License #: ______ Aliases or Maiden Names: ______ Please disclose any involvement you have had with Children's Division or any law violation convictions: _______

Failure to sign the waiver for Background Screening Waiver will result in the Rejection of Volunteer Application.