



**Return completed applications to:**  
*Essex County CASA*  
*212 Washington St., Room 912*  
*Newark, New Jersey 07102*  
*Tel.: 973-693-6785 Fax: 973-693-6791*

**Essex County CASA**  
**VOLUNTEER ADVOCATE APPLICATION**

*Volunteer Advocates must be 21 years of age or older*

**HOW DID YOU HEAR ABOUT CASA?:**

\_\_\_\_\_

**PERSONAL HISTORY**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Telephone: (H)** \_\_\_\_\_ **(W)** \_\_\_\_\_ **(C)** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Previous Address(es):** *(if within last 5 years)*

\_\_\_\_\_

\_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Marital status:** \_\_\_\_\_

**Children:** \_\_\_\_\_  
*(names/ages)*

\_\_\_\_\_

**Do you have an automobile available to you?**      **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

**Which training session are you interested in attending?** \_\_\_\_\_  
*(refer to training schedule in information packet and identify by the month)*

**STATISTICAL INFORMATION**

*The following information is for statistical purpose only.*

Sex: M\_\_\_\_F\_\_\_\_ Age: \_\_\_\_\_

Ethnicity: Asian \_\_\_\_\_ African American \_\_\_\_\_ Hispanic/Latino \_\_\_\_\_  
BiRacial \_\_\_\_\_ Caucasian \_\_\_\_\_ Other \_\_\_\_\_

Work: Full time \_\_\_\_ Part time \_\_\_\_ Retired \_\_\_\_ Student \_\_\_\_ Not working \_\_\_\_

**WORK HISTORY**

*(You may attach your resume)*

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

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

Dates of Employment: \_\_\_\_\_ Job Title: \_\_\_\_\_

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

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

Dates of Employment: \_\_\_\_\_ Job Title: \_\_\_\_\_

**Next Previous Employer:** \_\_\_\_\_

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

Dates of Employment: \_\_\_\_\_ Job Title: \_\_\_\_\_

**EDUCATION**

*Please indicate the highest grade completed:*

**High School: (9-12)** \_\_\_\_ **College: (1-4)** \_\_\_\_ **Graduate: (1-4)** \_\_\_\_

**High School:** \_\_\_\_\_ Year Graduated: \_\_\_\_\_

**College:** \_\_\_\_\_

Major: \_\_\_\_\_ Degree: \_\_\_\_\_ Year Graduated: \_\_\_\_\_

**Other (Graduate, Vocational, Professional):** \_\_\_\_\_

\_\_\_\_\_

Major/Course: \_\_\_\_\_ Degree: \_\_\_\_\_ Year Graduated: \_\_\_\_\_

Are you currently enrolled in school? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, name of school and course of study: \_\_\_\_\_

**SPECIAL INTERESTS, AFFILIATIONS AND ACTIVITIES**

List your community activities, affiliations and memberships (religious, civic, social, etc):

List current and previous volunteer work:

Hobbies/Special Interests:

Languages Spoken (*besides English*): \_\_\_\_\_

**TIME COMMITMENT**

Are you willing to complete a **minimum of 30 hours** of pre-service classroom training?

Yes \_\_\_\_\_ No \_\_\_\_\_

Are you willing to dedicate **10-15 hours a month** to this position?

Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have flexibility within your daytime schedule to occasionally attend court hearings and meetings (with notice)

Yes \_\_\_\_\_ No \_\_\_\_\_

Are you willing to commit to at least 1 year of volunteer service as an Advocate?

Yes \_\_\_\_\_ No \_\_\_\_\_

**PRELIMINARY SCREENING/BACKGROUND INFORMATION**

Do you consent to a routine criminal and child abuse /neglect check?

Yes \_\_\_\_\_ No \_\_\_\_\_

**IF YOU ANSWER YES TO ANY OF THE FOLLOWING QUESTIONS, PLEASE EXPLAIN ON PAGE 5.**

1. Have you ever been arrested/charged or convicted of a crime?

Yes \_\_\_\_\_ No \_\_\_\_\_

2. Have you ever been the subject of a child abuse/neglect investigation by Division of Youth and Families (DYFS), or any other child welfare agency?

Yes \_\_\_\_\_ No \_\_\_\_\_

3. Have you ever been arrested/charged or convicted of any sexual misconduct?

Yes \_\_\_\_\_ No \_\_\_\_\_

4. Have you ever been a foster parent or resource home provider?

Yes \_\_\_\_\_ No \_\_\_\_\_

5. Do you have any physical or mental health issues we should be aware of that may affect your ability to drive, use stairs, walk small distances, work directly with children, or otherwise perform your duties?

Yes \_\_\_\_\_ No \_\_\_\_\_

6. Can you think of any reason why a judge might be reluctant for you to serves as a sworn officer of the court and a CASA volunteer Advocate?

Yes\_ \_\_\_\_\_ No \_\_\_\_\_

**An applicant having a charge or conviction for a crime involving a sex offense or child abuse will not be accepted as a CASA volunteer. Applicants with other criminal charges will be evaluated on a case-by-case basis. Any applicant with an open DYFS investigation or open criminal proceeding, including parole/probation is ineligible until the case is closed, at which time they will be evaluated on a case by case basis.**

**REFERENCES**

**Personal References:** Please provide the names of two non family members, who have known you well for at least 1 year.

1) Name: \_\_\_\_\_

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

\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

2) Name: \_\_\_\_\_

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

\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Employer Reference:** Please list the name of one person, either current or previous, who has supervised you in a professional capacity. (volunteer work is acceptable). Students may use a teacher or advisor.

Name: \_\_\_\_\_

Title: \_\_\_\_\_

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

\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**PERSONAL STATEMENT**

In order for us to get to know you better, please tell us a little about yourself on a separate sheet of paper – typed or handwritten and 1/2 – 1 page in length.

**ADDITIONAL INFORMATION AND EXPLANATIONS**

Please use the space below to further explain any of your “yes” answers or otherwise provide further information you feel is relevant.

**Question No.**

**Explanation**

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

Additional Comments or Information:

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

**AFFIRMATION AND RELEASE**

I hereby affirm that all of the answers provided on my volunteer application are true. I hereby authorize the Essex County Court Appointed Special Advocate Program to investigate my background to determine my fitness as a potential volunteer. I agree to be fingerprinted by the Essex County Sheriff’s Department at the CASA Advocate training. I understand they will check them against the Bureau of Criminal Investigation database.

I understand that the information requested in this application will be used only for the purpose of determining suitability as a CASA volunteer.

I agree to let the CASA Executive Director know immediately if I am faced with any criminal charges and to abide by the policy that no volunteer may be associated with CASA who has been convicted of or charges pending for a felony or misdemeanor involving sex offense, child abuse or neglect or related acts that would pose risks to children or to the CASA program.

I understand that after the successful completion of my training, 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 volunteer CASA advocate. I will discuss these matters only with those persons who are directly involved in the case or who will be consulted for their professional knowledge and expertise.

Name (please print) \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Do not forget to submit your personal statement on a separate piece of paper.**