

**CASA of West Texas  
Court Appointed Special Advocates  
Application of Interest**

201 West Wall  
Suite 700  
Midland, Texas 79701  
432-683-1114 or 1-877-316-8346  
[www.casawtx.org](http://www.casawtx.org)

Today's Date \_\_\_\_\_

How did you hear about CASA? \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_

Home Address \_\_\_\_\_

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

County \_\_\_\_\_ Social Security Number \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Employment Status \_\_\_\_\_ Place of Employment \_\_\_\_\_

Employment Address \_\_\_\_\_

Position \_\_\_\_\_ Work Phone \_\_\_\_\_

Supervisor's Name \_\_\_\_\_

Do you have an understanding with employer or supervisor for reasonably flexible time?    Yes    No

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Please Circle:

Gender:    Male    Female    Date of Birth \_\_\_\_\_

(Must be 21 years old to advocate for a child)

Ethnicity:    African-American    Asian-American    Caucasian    Hispanic    Native American  
Other \_\_\_\_\_

What is your primary language?    English    Spanish    Sign Language    Other \_\_\_\_\_

Do you speak another language?    English    Spanish    Sign Language    Other \_\_\_\_\_

Education: Some High School GED High School Some College College Post Graduate  
Other \_\_\_\_\_

Marital Status: Single Married Divorced Widowed Separated

Name of Spouse \_\_\_\_\_

Children's names and ages \_\_\_\_\_

Do you drive? \_\_\_\_\_ Do you have access to a car? \_\_\_\_\_

Driver's License # \_\_\_\_\_ Car Insurance Co. \_\_\_\_\_

Policy# \_\_\_\_\_ Do you agree to maintain minimum liability insurance  
throughout your program participation? Yes No

Do you have experience working with children? Yes No

If yes, please explain (give type of activity/ages of children/professional or volunteer).

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

Do you have any personal or professional experience with the following (please explain)?

Child Abuse: Yes No

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

Foster Care: Yes No

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

Child Protective Service: Yes No

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

Criminal, Juvenile or Family Court system: Yes No

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

Other child service agencies: Yes No

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

Have you ever applied with another organization that works with children?    Yes    No

Were you accepted:    Yes    No            Name of organization: \_\_\_\_\_

What were your responsibilities? \_\_\_\_\_  
\_\_\_\_\_

Please list other volunteer experiences: (give name & date involved) \_\_\_\_\_  
\_\_\_\_\_

Have you ever applied to this or any other CASA in the past two years?    Yes    No  
If yes, when and where? \_\_\_\_\_

Why do you want to become a CASA volunteer? \_\_\_\_\_  
\_\_\_\_\_

What strengths do you feel that you have that you will utilize in working as a CASA volunteer?  
\_\_\_\_\_  
\_\_\_\_\_

What weaknesses do you feel that you have working as a CASA volunteer?  
\_\_\_\_\_  
\_\_\_\_\_

Present membership in clubs or organizations (include offices held):  
\_\_\_\_\_  
\_\_\_\_\_

Have you or any member of your family ever been involved with a case that was heard in the  
\_\_\_\_\_ County District Courts?    Yes    No

If yes, please explain and give dates and names:  
\_\_\_\_\_  
\_\_\_\_\_

Do you give CASA of West Texas permission to obtain information from agency(ies) or club(s)  
regarding your previous volunteer experience and membership?    Yes    No  
If no, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please complete all questions and give details as needed:**

Have you ever been hospitalized for an emotional problem?    Yes    No

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

Have you or **anyone in your household** ever been charged and/or convicted of a misdemeanor?

Yes    No

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

Have you or **anyone in your household** ever been charged and/or convicted of a felony?

Yes    No

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

Have you or **anyone in your household** ever been or are you currently on probation and/or parole?

Yes    No

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

If yes, state offense for probation/parole and give starting and ending dates: \_\_\_\_\_

Have you ever been convicted of a traffic violation?    Yes    No

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

Any DWI/DUI arrests or convictions?    Yes    No

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

Have you ever had your license revoked or suspended?    Yes    No

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

Do you now or have you ever had a chemical or alcohol dependency/abuse problem?    Yes    No

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

Are you now or have you ever had treatment for chemical or alcohol dependency/abuse?    Yes    No

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

Do you have any kind of health impairment?    Yes    No

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

Have you ever been charged or convicted of sexual misconduct (including pornography)?    Yes    No

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

Do you give CASA of West Texas permission to obtain additional information for screening purposes from other sources?    Yes    No

**As a CASA volunteer, will you be willing to:**

Commit a minimum of one year to being a CASA?    Yes        No

Attend all hearings and meetings on your case when they are scheduled?    Yes        No

Participate in CASA's initial training program of about 30 hours?    Yes        No

Participate in in-service training with CASA at least 12 hours a year?    Yes        No

Visit with child(ren) monthly in their placements?    Yes        No

Turn in monthly contact logs?    Yes        No

Participate in fact finding, monitoring, and report your knowledge orally and in written form to the court?    Yes        No

**Would you be willing to occasionally do any of the following?**

Work on fundraising or special projects?    Yes        No

Work on newsletter?    Yes        No

Help with presentations?    Yes        No

Help staff information booths at mall, fairs, etc?    Yes        No

Do office work (typing, computer, mailing, filing, etc)?    Yes        No

Supervise parent/child visits at the CASA Office?    Yes        No

Other \_\_\_\_\_

I am interested in becoming a CASA volunteer and know of no reason I should not be assigned a case in the program. I am aware that the children in the program have been abused, neglected, and/or abandoned by adults and I do not want to be another disappointment to them. Therefore, I will commit to a minimum of one year of service to my case.

The undersigned acknowledges and agrees that:

1. He/she is *not* obligated, if called upon, to accept a case herein applied for, and that
2. CASA is *not* obligated to assign or actively seek to assign him/her to a case, and that
3. As a part of CASA's policy, additional personal information will be gathered during the pre-interview process, and that
4. CASA retains the right to refuse any individual that it feels would not be in the best interest of the program and, further, CASA is not required to state the reason(s) for non-acceptance, and that
5. He/she is a volunteer and can resign from the program at any time without prior notice, and that
6. CASA can terminate a volunteer's service at any time without prior notice, and that
7. The volunteer's file is held in strictest confidence and becomes the property of CASA of West Texas.

I give my permission to CASA of West Texas to release information about my experience as a CASA volunteer to any other CASA program to which I may apply in the future.

I have truthfully responded to all of the questions on this application.

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Applicant's Signature

Date

It is the policy of CASA of West Texas to implement affirmatively equal service to all clients without regard to race, religion, sexual orientation, gender or national origin. CASA of West Texas selects volunteers without regard to race, religion, sexual orientation, age, gender, national origin or disability.

**PERSONAL REFERENCES**

Please list three references – **NO RELATIVES!** You MUST provide all of the information requested below or your file will not be complete.

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

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

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

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

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

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

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

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

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

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

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

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

**APPLICANT AGREEMENT**

I fully understand that completion of this form is only part of the application process and does not assure acceptance as a CASA of West Texas volunteer. **I understand that I must participate in an in-person interview before being accepted into the training program.** I understand that a criminal record check will be completed through the Texas Department of Protective and Regulatory Services and national and local law enforcement agencies. I understand that any written or oral misrepresentation in making this application is just cause for dismissal from consideration of participation in the program.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_