

Jackson County CASA, Inc. VOLUNTEER APPLICATION

VOLUNTEER JOB DESCRIPTION

A CASA (Court Appointed Special Advocate) volunteer is a trained volunteer child advocate sworn in by the Youth Court Judge to represent the best interest of children who are abused and neglected and are active cases in the Juvenile Court System. The CASA volunteer investigates the child's circumstances, provides fact-based information and makes recommendations to the court while becoming a source of support for the child. The CASA volunteer will provide a voice for the child, ensuring that the court, social services and legal counsel fulfill their obligations to the child in a timely fashion.

QUALIFICATION REQUIREMENTS FOR A CASA VOLUNTEER

In order to become a CASA volunteer an applicant must

- Be at least 21 years of age
- Successfully pass screening requirements that include a written application, Criminal records checks from the court jurisdiction in which the applicant currently resides and works, state criminal records checks, Child Abuse Registry checks, Social Security number verification, national criminal database checks, National Sex Offender Registry checks; if applicant has resided in another county or state in less than 7 years, and that jurisdiction is not covered by the national criminal background check utilized, it requires the program to secure county and state criminal record checks and/or child abuse registry or child protective services check, where permissible by law, in any county and or state in which the applicant has resided in the past seven years; personal interview with CASA staff and three personal references; rescreening required every four (4) years
- Successfully complete initial training provided by the CASA Program
- Be able to make an eighteen month minimum commitment to a case
- Accept supervision, maintain regular contact with CASA staff, and seek feedback from the CASA staff on a regular basis.
- Be able to keep information confidential and to work within established program guidelines

RESPONSIBILITIES OF A CASA VOLUNTEER

As a volunteer for Jackson County CASA, Inc. you have a responsibility to represent this Program and our clients with respect, dignity and professionalism. It is essential that you carry out your role in accordance with the guidelines provided in *The National CASA Volunteer Training Curriculum* as well as those provided by our Program. Below is a list of the basic responsibilities of a CASA volunteer as set forth by Jackson County CASA, Inc.

- Maintaining contact with the CASA staff is critical to your role as a volunteer.
- Conduct an Independent Investigation.
- Determine the Best Interest of the Child while maintain objectivity and confidentiality.
- Ensure that the child's best interests are being represented in all facets of the case.
- Be prepared for and attend Court Hearings; a verbal or written report is required.



- Keep the CASA staff, Department of Human Services and the Guardian ad Litem informed of your findings related to the assigned case.
- Plan meetings or prepare Motions when necessary.
- Monitor the case by visiting the child as often as necessary. Weekly contact and one monthly face-to-face meeting are required.
- Remain actively involved in the case until formally discharged by the court and/or the CASA Program.
- Provide the CASA staff with a monthly *Case Management Log* documenting all of your monthly activity.
- Abide by all laws and regulations governing your activities.
- Ask to be removed from involvement in a case if you discover any conflict of interest.
- Immediately disclose critical information to appropriate authorities and CASA staff.

VOLUNTEER TRAINING

Jackson County CASA, Inc. staff and other professionals shall conduct a training class that the volunteer applicant must complete. The *National CASA Volunteer Training* and *Fostering Futures* curriculums, guest speakers and other appropriately related materials will be used for the training program. The volunteer applicant must participate in a minimum of thirty (30) hours of training as well as observation of at least three (3) related Court Hearings involving CASA. The volunteer applicant is eligible to observe Court only after passing the criminal and child abuse registry checks, Social Security verification, all personal references are returned and verified, and completion of the volunteer training. An additional twelve (12) hours of in-service training will be held annually.

BENEFITS OF BEING A CASA VOLUNTEER

The role of a CASA volunteer is very rewarding. Not only will you make a difference in the life and future of a child who is the victim of abuse and/or neglect, you will have the opportunity to learn about the juvenile court system, social service agencies and, ultimately, yourself. By providing the voice for these deserving children you are helping to end the cycle of abuse and neglect.

**Jackson County CASA, Inc.
VOLUNTEER APPLICATION**

Please Print

Name: _____

Date of Birth: _____ Place of birth: _____

How long have you lived in Jackson County?: _____ Social Security #: _____

Address: _____

List all addresses from the past seven (7) years (attach additional paper as necessary):

Email: _____

Cell phone #: _____ Home phone #: _____

Occupation: _____ Work number: _____

Which number is best to reach you? _____ May we call you at work? _____

Do you drive? _____ If yes, do you have available transportation? _____

EMERGENCY CONTACT INFORMATION:

Name: _____ Relation to you: _____

Phone number: _____ Cell phone number: _____

In case of a natural disaster such as a hurricane, please provide the name and contact information of a person out of the area that can serve as your source of contact. Phone: _____

Name: _____

Address: _____

FORMAL EDUCATION, COMMUNITY INVOLVEMENT, VOLUNTEER EXPERIENCE, etc.

Highest school/education completed: _____



Current community activities (attach additional paper as necessary): _____

List current and previous volunteer work, including brief description of duties and activities, dates of service; use additional paper as necessary): _____

VOLUNTEER COMMITMENT:

As a CASA volunteer you will be required to attend Court Hearings for the children you represent. Will you be able to arrange your schedule to attend these hearings? _____

Are you willing to commit to eighteen (18) months of volunteer service? _____

What are your reasons for wanting to participate as a CASA volunteer member? _____

Have you had any personal experience(s) involving any of the following?

Child Welfare: _____ Foster Care: _____

Court System: _____ Any agency offering child services? _____

If so, please explain: _____

How did you learn of our program? _____

BACKGROUND INFORMATION:

Have you ever been convicted of a crime other than a minor traffic violation? _____

If yes, what was the charge? _____

Date of conviction: _____ Where?: _____

Do you consent to a routine check of your criminal records? _____

Can you think of any reason why a judge or anyone else might be reluctant for you to serve as a CASA volunteer? _____

Have you or any family member or relative been involved in the Youth Court? _____

REJECTION OF APPLICANT:

Jackson County CASA, Inc. reserves the right to reject the volunteer applicant if, but is not limited to, the following reasons:



- If he/she refuses to sign release of information
- If the applicant is 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 credibility

PERSONAL REFERENCES:

Please list three references of people who know you well, other than relatives, preferably for whom you have worked in either a paid or voluntary capacity. If you are currently working, either paid or as a volunteer, please include the name of your supervisor.

Name: _____

Address: _____

Phone #: _____ Relationship: _____

Name: _____

Address: _____

Phone #: _____ Relationship: _____

Name: _____

Address: _____

Phone #: _____ Relationship: _____



Jackson County CASA, Inc. reserves the right to make any checks deemed appropriate as to the suitability of anyone responsible for this confidential work. All information obtained will be held in the strictest confidence.

Part Two

Please answer the following questions in paragraph form on a separate piece of paper:

1. Please write a short summary about your interest in volunteering and how you hope to benefit from the volunteer experience.
2. Briefly explain what led to your decision to apply for a position (either staff or volunteer) in the CASA program? (What attracted you to this particular program?)
3. Briefly explain your philosophy of parenting, including the rights and responsibilities of both parents and children.
4. Briefly explain what role you believe society should play in:
 - a) protecting the rights of children
 - b) helping a family overcome hardships and remaining together as one unit.
5. Please write a one page autobiography.

AFFIRMATION AND RELEASE

I, _____, hereby affirm that all the answers provided on my volunteer application are true. I hereby authorize Jackson County CASA, Inc. and any law enforcement agency they authorize, to investigate my background to determine my fitness as a potential volunteer.

I understand that the information requested in this application will be used only for the purpose of determining suitability as a CASA volunteer. Further, I understand that completion of training does not guarantee that I will be assigned a case. If I have successfully completed training and met all other requirements, and it has been determined that I am a suitable volunteer, 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 CASA volunteer. I will discuss these matters only with those persons directly involved in the case or who will be consulted for their professional knowledge and expertise.

I also understand that if for any reason it becomes apparent that my activities are contrary to the policies, goals and/or philosophy of the CASA program and their desire to provide quality services to abused and neglected children, my services as a CASA volunteer will be terminated.

NAME (please print)



Signature

Date

Witness (CASA Program staff)

*Please return completed application and essays to Jackson County CASA, Inc.
4903 Telephone Road, Pascagoula, MS 39567
Phone: 228-762-7370 Fax: 228-762-7385*



PERMISSION FOR BACKGROUND and SOCIAL SECURITY VERIFICATION CHECKS

To Whom It May Concern:

I hereby authorize Jackson County CASA, Inc. to conduct an investigation on my background in conjunction with program guidelines.

I further authorize any Mississippi law enforcement agency to conduct a criminal records check and to release the results of said criminal records check to Jackson County CASA, Inc. Further, this release is authorized to obtain information from the Child Abuse Central Registry, previous employers, and any other persons to determine my suitability in working with children.

I execute this release with the full knowledge and understanding that the information to be obtained about me is for official use of Jackson County CASA, Inc.

I have read the above waiver and release statement and fully understand what rights I am waiving by signing this document.

Signature Date

Full Name

Previous Names (Maiden, etc)

Social Security Number Date of Birth

Current Address: _____

Previous Addresses for the past FIVE YEARS (5): _____

LAW ENFORCEMENT USE ONLY

Agency: _____ Date: _____

Record found: Yes No

Signature Title



**CASA COMMITMENT
COURT APPOINTED SPECIAL ADVOCATE**

This agreement is entered into for the purpose of providing the best possible advocacy for the child/children with whom I work. I fully understand that failure to complete or comply with any of the following requirements may result in my termination as a volunteer or employee of Jackson County CASA, Inc. Upon signing this statement, I, _____, am making a commitment to Jackson County CASA, Inc. and to the children whom I will serve as a CASA volunteer. I will:

1. Serve at least one child, from the time of the court assignment through to the implementation of a permanent plan for the child; a period of at least 18 months.
2. Give all the time necessary to provide the Court with the information necessary to make an informed decision for the child and to assure that the child receives adequate representation as to his or her best interests.
3. Maintain strict confidentiality. To maintain strict confidentiality means that the CASA volunteer:
 - a. Does not discuss his/her child's case with spouse, friends or other relatives.
 - b. May only discuss his/her child's case with a CASA supervisor, another CASA volunteer, or persons who are party to the case.
4. Uphold the transportation policy of maintaining vehicle liability insurance (a copy of insurance liability will be submitted to the Program Coordinator), seeking approval of caretaker/custodian of the child, and notifying the Program Coordinator of this activity. It is not permissible for the CASA Volunteer to invite and/or receive clients into his/her home, without the approval of the Volunteer Coordinator.
5. Attend twelve hours of in-service training per year.
6. Staff (in-person) with the Volunteer Coordinator a minimum of once a month to inform him/her of my child's status and to submit required written documentation.
7. Record written documentation on a CASA record of contact form and submit to the Volunteer Coordinator by the 5th working day of each month.
8. Notify the Volunteer Coordinator immediately if I cannot perform any of the above commitments.
9. Maintain professionalism in behavior and appearance, including, but not limited to, maintaining only a professional relationship with all parties involved in the case.

Jackson County CASA, Inc. makes the commitment to:

1. Provide ongoing training, supervision, and help in evaluating my work.
2. Provide the professional consultation and necessary support in order to promote appropriate interventions into the child's situation and to facilitate appropriate recommendations about his/her placement.

Signature of Volunteer

Date

Volunteer Coordinator

Date



JACKSON COUNTY CASA

Jackson County CASA, Inc., Pascagoula, MS

An agency of United Way for Jackson and George Counties since 1999

CASA CONFIDENTIALITY AND PROFESSIONALISM STATEMENT

A. I, _____, upon signing this statement, agree to maintain strict confidentiality as a CASA volunteer, as follows:

- (1) I will not discuss any case to which I am assigned with my spouse, children, friends or other relatives.
- (2) I may only discuss any case to which I am assigned with my CASA staff, another CASA volunteer, or persons who are party to the case.

Upon violation of A. (1) and/or A. (2) above, I realize that I may immediately be dismissed from my position as a CASA volunteer.

B. I, _____, upon signing this statement, agree to maintain a strictly professional relationship with all parties to any case to which I am assigned as a CASA volunteer, as follows:

- (1) I will not contact or communicate with any party to any case to which I am assigned for any reasons other than my professional investigation of the circumstances surrounding said case;
- (2) I will not maintain or pursue anything other than a professional relationship with any party to any case to which I am assigned.

Upon any allegation by anyone that I have violated B. (1) and/or B. (2) above, I realize that I will immediately be suspended from any further action on my case to which I am assigned until said matter is fully investigated; and if Jackson County CASA, Inc. determines that a reasonable probability exists that such conduct did occur, that I will immediately be dismissed from my position as a CASA volunteer.

Signature of Volunteer

Date

Signature of CASA Staff

Date



Jackson County CASA, Inc.
VOLUNTEER APPLICATION CHECKLIST
For office use only

Name: _____

Address: _____

Email: _____

Cell phone #: _____ **Home phone #:** _____

APPLICATION:

Mailed Emailed Delivered by staff Picked up from office by applicant

Date sent: _____ Date returned: _____

EMERGENCY CONTACT INFORMATION:

Name: _____ Relation to you: _____

Phone number: _____ Cell phone number: _____

In case of a natural disaster such as a hurricane, please provide the name and contact information of a person out of the area that can serve as your source of contact. Phone: _____

Name: _____

Address: _____

PERSONAL REFERENCES:

1. Name: _____

Date returned: _____ Recommended Not Recommended

2. Name: _____

Date returned: _____ Recommended Not Recommended

3. Name: _____

Date returned: _____ Recommended Not Recommended

BACKGROUND CHECK

Permission Provided

NCIC Records Check

Local Criminal Records Check

Child Abuse Registry Check

OTHER

Statement of Confidentiality

Copy of Social Security Card

Copy of Driver's License

Training Completed: _____ Highest level of Education: _____
Date

