Arizona Supreme Court
Court Appointed Special Advocate (CASA) Program

VOLUNTEER CERTIFICATION APPLICATION

Any willful omission or misrepresentation of any fact required to be disclosed in this application or any accompanying statement may result in certification (initial or ongoing) denial. This is pursuant to the Administrative Code Sections governing Court Appointed Special Advocates in Arizona.

INSTRUCTIONS

1. Application must be printed in ink or typed.
2. Complete all pages of this application and fulfill all other requirements mentioned in the instructions.

SECTION I: APPLICANT QUALIFICATIONS

I am a U.S. Citizen or Legal Resident. ☐Yes ☐No

Applicants who are employed by DES, the juvenile court, or child welfare agencies may serve as a CASA volunteer if authorized by a juvenile court judge. Are you employed by DES, the juvenile court, or child welfare agency? ☐Yes ☐No

I am at least 21 years of age. ☐Yes ☐No

SECTION II: APPLICANT INFORMATION

Legal Last Name:	Legal First Name:	Middle Initial:	AKA/Alias:
County:	Mailing Address Including Zip Code (May be a PO Box):		
Email Address (If none, skip)			
Home Telephone Number ( ) Cell Phone ( )	Fax Number (Optional) ( )		

Additional information needed for a criminal background information check:

☐ Male ☐ Female

Ethnicity_____

Height _____ Weight _____ Eye Color _____ Hair Color _____

Date of Birth (month/day/year) _____ Place of Birth _____

Social Security Number _____

In case of an emergency, whom should we contact for you? (list name, phone number, and relationship)

May we distribute your name, address, and telephone numbers to other CASA county volunteers?
☐ Yes ☐ No

List relevant work or volunteer experience

Other than English, list languages in which you are fluent (if any)

List any affiliation which relates to the foster care system (Example: adoption, child advocacy)
There are opportunities other than child advocacy assignments to assist the Arizona CASA Program, such as administrative office work, public speaking and writing newsletters. If you would be interested in serving in any of these or other capacities, please list them.

SECTION III: EMPLOYMENT EXPERIENCE (LIST CURRENT EMPLOYMENT)

Company Name and Mailing Address Including Zip Code		
Telephone Number ( )	Fax Number ( )	
Hours Worked	Work/Week	Days Off
Position Title		
Duties		
List any prior experience you have working with children		

SECTION IV: VEHICLE INFORMATION

You may be transporting children and families in the course and scope of your volunteer work. Therefore, additional vehicle information is requested. Upon acceptance into the program, you will need to inform your insurance carrier that you are transporting people in your volunteer work and provide proof of insurance to the county coordinator on an annual basis.

Do you have access to a car? ☐ Yes ☐ No	Driver's License Number
State in which driver's license is issued	Name of Insurance Carrier

SECTION V: BACKGROUND INFORMATION

If you answer "yes" to any of the following questions, explain the nature and details of the case, the charge, and criminal history disposition. Attach additional explanation sheets if necessary.

1. Have you ever been convicted of any crime in this state or any jurisdiction?	☐Yes ☐No
2. Do you have any charges pending or are you currently awaiting trial for any felony?	☐Yes ☐No
3. Have you ever been convicted of a felony? The fact that you entered into a plea bargain or pled "no contest" or that your conviction has been vacated, pardoned, expunged, dismissed, or appealed, or that your civil rights have been restored does not mean that you can answer the question "no." You **MUST** answer "yes" and provide the details of the offense and explain.	☐Yes ☐No
4. Are you currently on probation, parole or community supervision for a felony offense?	☐Yes ☐No
5. Have you ever had disciplinary action taken against you by any state or federal court, administrative or regulatory agency, or by any professional licensing disciplinary board? *(Examples: administrative order, reprimand, censure, fine or other penalty)*	☐Yes ☐No
6. Have you been found in any professional licensing disciplinary board's final decision to have sexually or physically abused or exploited any minor, developmentally disabled person, or vulnerable adult?	☐Yes ☐No

7. Has there been a finding against you in a civil, probate, domestic relations, or dependency or other court case, that you have sexually assaulted, exploited, or physically abused any child or vulnerable adult?	☐Yes	☐No
8. Have you used any non-prescribed controlled substances and/or illegal drugs, including marijuana, within the past two (2) years?	☐Yes	☐No
9. Are you currently using any non-prescribed controlled substances and/or illegal drugs, including marijuana?	☐Yes	☐No
10. Are you the parent or guardian of a child currently in the dependency process or adjudicated to be dependent?	☐Yes	☐No
11. Do you have a record in the DES Central Registry of substantiated acts of abuse or neglect?	☐Yes	☐No
12. Are you currently named in an outstanding arrest warrant?	☐Yes	☐No
A "Yes" answer to any of the following questions does not necessarily disqualify you from serving as a CASA volunteer.		
13. Have you ever been convicted of a misdemeanor? The fact that you entered into a plea bargain or pled "no contest" or that your conviction has been vacated, pardoned, expunged, dismissed, or appealed, or that your civil rights have been restored does not mean that you can answer the question "no." You **MUST** answer "yes" and provide the details of the offense and explain. *Do not answer "yes" if you have only minor civil traffic violations*	☐Yes	☐No
14. Have you ever been convicted of a violation of A.R.S. § 28-1381, § 28-1382, or § 28-1383? *(These statutes deal with driving under the influence)*	☐Yes	☐No
15. Do you have a record of conviction by final judgment of a misdemeanor involving moral turpitude? *(Example shoplifting, writing bad checks, trespassing, etc.)*	☐Yes	☐No
16. Are you the subject of an allegation or investigation in any criminal matter?	☐Yes	☐No
17. Do you have any charges pending or are you currently awaiting trial for any misdemeanor?	☐Yes	☐No
18. Have you ever been found liable in a civil lawsuit which included an allegation of misrepresentation, fraud, misappropriate, material omission, theft, or conversion?	☐Yes	☐No
19. Do you have a record of any act constituting dishonesty or fraud? *(Examples would include, but would not be limited to, charges of plagiarism, lying under oath, or cheating on an exam)*	☐Yes	☐No

SECTION VI PERSONAL REFERENCES

(LIST 3 NONRELATIVE PERSONS OR SIGNIFICANT OTHER **NOT** RESIDING IN THE SAME HOUSEHOLD)

Name _____ Relationship _____

_____
Address City State Zip Code

Telephone # ( ) _____ Email Address _____

Name _____ Relationship _____

_____
Address City State Zip Code

Telephone # ( ) _____ Email Address _____

Name _____ Relationship _____

_____
Address City State Zip Code

Telephone # ( ) _____ Email Address _____

SECTION VIII AUTHORIZATION, RELEASE AND STATEMENT OF UNDERSTANDING

I hereby submit this application to the State of Arizona Supreme Court, Court Appointed Special Advocate (CASA) Program. This application is for certification as a CASA volunteer under the provisions of A.R.S. § 8-522 providing for CASA volunteers.

I understand that background investigations including criminal history, a polygraph exam, Department of Economic Security (DES) Central Registry information, and motor vehicle records are some of the screening procedures and are conducted on all applicants including the recertification process. I consent to the background check and all components stated above for the purpose of aiding such a background investigation. I agree to submit to this procedure with the knowledge that the results of this investigation are a determining factor in obtaining certification as a CASA volunteer.

In submitting this application, I further agree to abide by all confidentiality laws as of the date of this application. I understand that my application does not ensure acceptance into the CASA of Arizona program. I also understand that CASA of Arizona reserves the right to disqualify any applicant who would not be a good match for this volunteer position. Service as a CASA volunteer is by grace and not by right. I understand that CASA of Arizona reserves the right to terminate the service of a volunteer for any reason.

The filing of an application which is false or misleading may result in denial, suspension, or revocation of a certification.

I affirm my statements on this application are true and correct. I have disclosed all aspects of my criminal and background history that would affect my participation in the program.

Signature of Applicant:_____

Date:_____

CASA of Arizona

Statistical Information

(Optional)

We have a program of applicant information research. The information you provide on this form will assist CASA of Arizona in evaluating recruitment and selection procedures. Information provided will not be used in any way to affect the application process, rating, or employment, nor will it be supplied to any hiring authority.

Name _____

Ethnicity Anglo-American ☐ Latino-American ☐ African-American ☐

Asian-American ☐ Native-American ☐ Other ☐ _____

Arizona Legislative District _____ **U.S. Legislative District** _____

Education		Employment	
Doctoral	☐	Employed full-time in a related field	☐
Masters	☐	Employed part-time in a related field	☐
BA unrelated field	☐	Employed full-time in an unrelated field	☐
BA related field	☐	Employed part-time in an unrelated field	☐
Technical degree/certification	☐	Retired	☐
Associates degree	☐	Student	☐
Some college or Tech School	☐	Unemployed	☐
High School Grad or GED	☐	Other	☐
Grade School	☐		
		How many hours a week do you work? _____	

SECTION VII REFERRAL SOURCE

☐ Billboard _____ Name	☐ Faith-based organization _____ Name	☐ Presentation _____ Name
☐ Bookmark	☐ FCRB Member	☐ Radio
☐ Brochure _____ Name	☐ Friend/relative ☐ Magazine _____ Name	_____ Name
☐ CASA Volunteer		☐ TV _____ Name
☐ Community Event _____ Name	☐ Newsletter _____ Name	☐ Volunteer Referral Agency _____ Name
☐ Educational Facility _____ Name	☐ Newspaper _____ Name	☐ Website/Internet _____ Name
☐ Employer _____ Name	☐ Other _____ ☐ Poster	