



CASA of Peoria County
324 Main Street, Room 215
Peoria, IL 61602
P (309) 669-2939 F (309) 672-6957
www.casapeoria.org

APPLICATION REQUIREMENTS

Thank you for your interest in the Court Appointed Special Advocate program of Peoria County. Following are the list of requirements to be accepted into the training program:

- You must be 21 years of age.
- No immediate relative or individual involvement with the Department of Children and Family Services (DCFS).
- Participants cannot be active foster parents.
- Any applicant 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 is not eligible to be a CASA volunteer.
- Complete and return the **Volunteer Application** (included in this packet.)
- All previous names must be listed on the application.
- Please list three references on your application. Send each person a reference form to be completed, with instructions to return the form directly to the CASA office.
- Participate in a face-to-face **interview**.
- Submit to and pass **background checks**, which will include
 - CANTS (Child Abuse and Neglect Tracking System)
 - LEADS (Law Enforcement Detailed Summary)
 - Fingerprints (submitted to the FBI)
 - National Sex Offender Registry
 - A valid Driver's License or government issued identification
 - Verification of social security number

TRAINING REQUIREMENTS

Thirty (30) hours of classroom participation--attendance for each class is mandatory. The syllabus includes information pertaining to child abuse and neglect, the legal and social service systems, permanency planning and advocacy. Training also addresses practical issues related to case advocacy, such as policy and procedures, the court process, and communication/negotiation skills. Upon completion of training, there will be a Swearing-In Ceremony before the Juvenile Court Judge. The volunteer will be appointed an officer of the court.

CASA COMMITMENT/ REQUIREMENTS

As a CASA, you will be assigned one case at a time requiring approximately 5 to 15 hours per month. Your role is to help insure that all decisions are in the best interests of the child. You must attend all court hearings and appropriate interagency meetings regarding the child as a part of this commitment. Hearings take place every 3-6 months. You are required to submit monthly activity reports to the CASA office.

As a CASA, you are required to submit a formal Report to the Court detailing your findings and observations. Court Reports are due to the CASA office no later than 21 days before the scheduled hearing.

An additional 10 hours of in-service training per year is also required.

Speak Up For A Child!



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Volunteer Application

Last name _____ First name _____ Middle _____

Home address _____ Apt _____

City _____ State _____ Zip _____

County _____ Social Security number _____

Home phone number _____ Work phone number _____

Cell phone number _____ Fax number _____

E-mail address _____

Previous address _____

Gender Female Male Date of birth _____

Employment status Full time Part time Student Not employed Retired

Place of Employment _____

Position _____ May you be called at work? Yes No

Emergency phone _____ Emergency contact _____

Marital Status _____ Spouse's Name _____

Spouse's Occupation _____ Phone number _____

Do you have children? Yes No If so, what are their ages? _____

Ethnicity African-American Asian-American Caucasian Latino Native American
 Other Unknown

Formal Education (Highest year of school completed) Some high school GED High school
 Some college College Post-graduate Other

Major _____ Degree _____

What is your primary Language? English Spanish Signing French Other _____

Do you speak another/secondary Language? French Signing Spanish Other _____

Referred by Flier Friend Internet Local newspaper Local radio

National media Agency, please name _____ Other, please describe _____

Do you drive? Yes No Do you have regular access to a car? Yes No

Driver's license number _____

Have you ever been arrested? Yes No If yes, on what charge? _____

Have you ever been convicted of a charge, including sex-related or child-abuse related offenses? Yes No

If yes, on what charge and date? _____

Can you think of any reason why a judge might be reluctant for you to serve as a CASA Volunteer?

Yes No If yes, then why? _____

Are you prepared to complete 32 hours of pre-service training; and a minimum of 10-12 hours per year of in-service training? Yes No

Does your schedule permit you to attend meetings, court hearings or foster care reviews during the work day? Yes No

CASA of Peoria County will not accept into the program individuals who have been convicted of any criminal act or who have been adjudicated in Juvenile Court to have abused or neglected a child. This is inclusive of, but not limited to, any sexual offense, abuse, neglect, or related acts that would pose risks to children or the CASA program's credibility.

Do you have training or experience in any of the following?

- | | | |
|---------------------------------------|---|---|
| <input type="radio"/> Medicine | <input type="radio"/> Drug or Alcohol Abuse Programs | <input type="radio"/> Counseling |
| <input type="radio"/> Psychology | <input type="radio"/> Child Welfare | <input type="radio"/> Child Development |
| <input type="radio"/> Child Care | <input type="radio"/> Criminology | <input type="radio"/> Social Work |
| <input type="radio"/> Education | <input type="radio"/> Advertising of Public Relations | <input type="radio"/> Law Enforcement |
| <input type="radio"/> News Media | <input type="radio"/> Art or Graphic Design | <input type="radio"/> Writing |
| <input type="radio"/> Public Speaking | <input type="radio"/> Mental Health | <input type="radio"/> Fundraising |

List your community activities and memberships in clubs, religious and professional groups, and other organizations. Please include previous volunteering experiences:

Hobbies/Special Interests: _____

What do you feel are the strengths and weaknesses that you bring to this program?

Please describe any personal or professional experiences you have had which involved child abuse or neglect, the Department of Child and Family Services, the Juvenile Court system, foster care, or other agencies offering services to children:

Write a brief statement why you would like to work with the CASA program at this time in your life. *(Use additional paper and submit with application)*

PERSONAL REFERENCES:

(Preferably other than relatives). At least one reference must be from someone other than a friend or co-worker. For example: teacher, therapist, or employer, if they know you well.) Please list the three people you intend to send reference letters to, enclosed in your packet are three letters and three envelopes. Provide these letters and envelopes to the three people you have listed here, and have them return the completed form to us via the provided envelope.

(PLEASE PRINT)

1. Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Relationship _____

2. Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Relationship _____

3. Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Relationship _____

I, _____, hereby affirm that all of the answers provided on my volunteer application are true. I hereby authorize CASA of Peoria County 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 my suitability as a CASA volunteer. Further, I will understand that completion of training does not guarantee that I will be assigned a case. If I have successfully completed the training and have met all other requirements, and it has been determined that I am a suitable volunteer, I understand that I will be expected to serve a minimum of two years 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.

I authorize *CASA of Peoria County*, to use, reproduce, and/or publish photographs and/or video that may pertain to me—including my image, likeness and/or voice without compensation. I understand that this material may be used in various publications, public affairs releases, recruitment materials, broadcast public service advertising (PSAs) or for other related endeavors. This material may also appear on the organization's Internet Web Page and/or social media pages. This authorization is continuous and may only be withdrawn by my specific rescission of this authorization. Consequently, *CASA of Peoria County* may publish materials, use my name, photograph, and/or make reference to me in any manner that the organization deems appropriate in order to promote/publicize service opportunities.

Name (Please Print) _____ Date _____

Signature _____ Witness _____

(CASA Program Staff)



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Authority to Release Information

To Whom It May Concern:

I hereby authorize CASA of Peoria County to conduct an investigation on my background in conjunction with the program guidelines.

I authorize CASA of Peoria County to conduct a search of the ISP, FBI national criminal history record data bases, the National Sex Offender Registry and Social Security checks. In addition, I specifically authorize the release of any criminal history record information that may exist from any agency, organization, institution, or entity having such information on file. I further authorize any Peoria County law enforcement agency and the Department of Child and Family Services to conduct a criminal records background check and to release the result of said criminal records background check to CASA of Peoria County.

This release is executed by me with the full knowledge and understanding that the information to be obtained about me is for official use of Court Appointed Special Advocated (CASA) of Peoria County.

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

Name:

(Please Print)

Signature:

Date:

Previous Names:

(Maiden, etc.)

SS#:

Date of Birth:

Sex:

Race:

Current Address:

Previous Address(es) for the past 5 years:



CASA of Peoria County

Date: _____

Name of Applicant: _____

To Whom It May Concern:

The person named above has applied to work as a volunteer in the Court Appointed Special Advocate (CASA) program and has listed you as a reference. We would appreciate your written assessment of the applicant's ability to serve as a volunteer in our program. Please use the form attached to this letter for your assessment.

Here is a brief program description that may help with your assessment of the applicant:

The CASA is a citizen volunteer sworn in as an Officer of the Juvenile Court and appoint by the judge to represent children who have been abused or neglected. The CASA gathers information and makes formal reports to the court based upon their life experience, observations and interactions with the child, the family members and other professionals involved in the child's life.

CASA work requires a high degree of responsibility and commitment to the well-being of children. It is essential that the CASA have the ability to respect confidential, relate to people from many different walks of life and remain objective in their evaluations.

Thank you for your prompt attention to this request. If you have any questions, please feel free to call (309) 669-2939.

Pamela Perrilles
Executive Director

A Powerful Voice in a Child's Life!

Tenth Judicial Circuit Court, 324 Main Street, Room 215, Peoria, Illinois 61602

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PERSONAL REFERENCE FORM

Please print

1. In what capacity have you known the applicant and for how long?

2. Would the applicant have a problem working with individuals with any of the following?

Different race _____ Physical/Mental Disability _____

Other _____

3. Please rate the applicant on the following characteristics:

	Above Average	Average	Below Average	Unknown
Takes initiative				
Completes tasks in a timely manner.				
Has a positive attitude.				
Pays attention to detail.				
Ability to work with others.				
Willingness to accept supervision.				
Oral & written communication skills.				
Ability to maintain confidentiality.				
Ability to handle multiple responsibilities.				

4. Please explain why you believe the applicant would be a successful advocate for children:

Name of person completing this form: _____

Signature: _____ Date: _____

Address: _____ Phone: _____

Applicant's Name: _____