



San Juan CASA Volunteer Application

San Juan CASA Program of Childhaven
807 West Apache (mailing address)
815 W. Apache (physical address)
Farmington, NM 87401
(505) 325-5358 ext. 180, 181 or 182
(505) 326-3085 – Fax
Email: volunteersup@childhavennm.org

Date: _____

Name: _____
 First Middle Last

Address: _____

City: _____ State: _____ Zip: _____

Phone: (Home) _____ (Work) _____ (Cell) _____

E-mail: _____

Are you 21 years old or older? : _____

Name of Contact person in case of emergency: _____

Phone: _____ Relationship: _____

How did you hear about this program? _____

Current Employer: _____

Address: _____

Phone: _____

What days and hours are you available to work for this program?

Days: _____ Hours: _____

Please list any additional employment or personal commitments that may restrict your time to the program:

Please list any Hobbies and/or Special Interests:

WE WILL USE THE EMPLOYER LISTED ABOVE AS ONE OF YOUR REFERENCES. PLEASE LIST FOUR ADDITIONAL REFERENCES WE MAY CONTACT, ONE REFERENCE **MUST** BE A RELATIVE. BE SURE TO GIVE **COMPLETE AND CURRENT ADDRESSES AND PHONE NUMBERS.**

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE: Home: _____ Work or Cell: _____
RELATIONSHIP: _____

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE: Home: _____ Work or Cell: _____
RELATIONSHIP: _____

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE: Home: _____ Work or Cell: _____
RELATIONSHIP: _____

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE: Home: _____ Work or Cell: _____
RELATIONSHIP: _____

USE THE BACK OF THE PAGE IF YOU NEED ADDITIONAL SPACE TO RESPOND TO THE FOLLOWING QUESTIONS:

1. Give a brief description of your employment background:

2. Give a brief description of your education and training background:

3. List any special skills and/or interests you may have (computer skills, fundraising, childcare experience, etc.):

4. Please list the reason(s) you are interested in volunteering:

5. What do you hope to gain through your volunteer work with Childhaven/CASA?

6. Have you ever personally experienced or worked with any of the following?

_____ Foster Care

_____ Juvenile Court System

_____ Child Care

_____ Other agencies offering services to a child

If so, please explain:

7. Working closely with abused and neglected children can be stressful. Describe the types of support available to you:

8. Do you have any difficulties with your health that may limit your ability to perform your duties?

If so, please describe:

9. How long have you resided in San Juan County? In New Mexico?

10. Do you speak any other language besides English (i.e. Spanish, Navajo, etc.)?

11. Are you able to commit to the volunteer program at the San Juan CASA Program for one year?

12. Can you commit to attending In-services and supervision required?

13. Is there anything else you would like to let the San Juan CASA Program know about yourself?

PLEASE ATTACH ANY ADDITIONAL INFORMATION YOU WANT TO SUBMIT.

Applicant's Signature

Date

Childhaven is an "Equal Opportunity Employer". Opportunities for employment, advancement, training and compensation are equal for applicants and employees regardless of race, color, creed, national origin, gender, age, marital status, sexual orientation or disability at all levels of employment.

I understand that Childhaven will conduct background searches to include but not limited to the following: State Court, Sex Offender Registries, State, Local, & Federal Law Enforcement, Motor Vehicle Reports, SSN Verification and the Children, Youth & Family Departments.

Rejection Policy

A CASA volunteer applicant will be rejected 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 a child or the San Juan CASA Program's credibility.



SAN JUAN COUNTY CASA PROGRAM VOLUNTEER REFERENCE REQUEST

Re: _____

Date: _____

Dear _____,

The above referenced applicant has applied as a volunteer to our program and has given you as a reference. CASA volunteers provide information on children who are abused and neglected, making recommendations to the Court as to a child's best interest. This reference form will be used to assess the applicant's ability to carry out the role of a Court Appointed Special Advocate. Selected applicants will receive a minimum of 30 hours of training and ongoing program supervision. Your information will enable us to assess the applicant's ability to serve as a CASA Volunteer. Please use the enclosed envelope to return this Questionnaire. ***Thank you.***

(ALL INFORMATION RECEIVED WILL BE HELD CONFIDENTIAL IN EVERY RESPECT)

1. In what capacity have you known the applicant? _____
For how long? _____
2. How well do you know the applicant? Very well ___ Well ___ Average ___
Good ___ Extreme Conflict ___ Doesn't Apply ___
3. Applicant's relationship to own children, if applicable? Good ___ Average ___
Mild Conflict ___ Extreme Conflict ___ Doesn't Apply ___
4. Applicant's relationship to youth in general. (*Check as many as are applicable*)
Understanding ___ Impatient ___ Patient ___ Well Liked ___ Friendly ___
Distant ___ Stern ___
5. Applicant's relationship with people in general. (*Check as many as are applicable*)
Warm ___ Shallow ___ Sincere ___ Cool ___ Loyal ___ Shy ___
6. How would you describe the applicant's friendships? (*Check as many as are applicable*)
Many friends constantly changing ___ Few friends constantly changing ___
Many friends loyal ___ Few friends loyal ___ Average ___ No friends ___
7. How would you rate applicant's health? Average ___ Good ___ Fair ___ Poor ___

8. Check as many of the following as describe the applicant. Domineering____ Cooperative____
Leader____ Follower____ Confident____ Happy____ Unhappy____ Friendly____
Considerate____ Stubborn____ Moody____ Assertive____ Reserved____ Lazy____
Nervous____ Well-adjusted____
9. To what extent is this applicant aware of his/her shortcomings?
Feels she/he has none____ Strives to overcome them____ Ignores them____
Accepts them____ Unknown____
10. Check those of the following that describe the applicant's temperament? Stable____ Easily
upset____ Impatient____ Patient____ Hot-tempered____
11. Do you consider this applicant emotionally stable? Yes____ Usually____
If no, why not? _____
12. Describe the applicant's ability to be flexible? Excellent____ Good____ Average____ Fair____
Poor____
13. How does the applicant assume responsibility? Excellent____ Good____ Average____ Fair____
Poor____
14. How well does applicant finish projects or activities begun? Very well____ Well____
Average____ Fair____ Poor____
15. How would you rate the applicant's ability to handle confidential information? Excellent____
Good____ Fair____ Poor____ Cannot maintain confidentiality____
16. How would you rate the applicant's ability to be objective, not judging other's behavior or
lifestyles?
Very accepting of others____ Somewhat bothered by lifestyles different than own____ Critical of
others who live and act differently____
17. Is this applicant critical or somewhat bothered by different ethnic backgrounds? No____ Yes____
If yes, explain _____
18. In your opinion, has the applicant ever had a drug or alcohol problem? No____ Yes____
If yes, explain _____
19. Has the applicant ever had his/her driver's license revoked or suspended? No____ Not to my
knowledge____ Yes____ If yes, explain _____
20. Has this applicant ever been accused, arrested, or convicted of a crime? No____
Not to my knowledge____ Yes____ If yes, explain _____
21. In a few words, please summarize what your overall reaction or feelings are towards this applicant.

22. Would you be comfortable having the applicant as an Advocate for a member of your family?
Yes____ No____ If no, why not? _____

SIGNATURE: _____

DATE: _____