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: ____________________________

Revised on 11/27/15
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:

Revised on 11/27/15
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
   _____ Other agencies offering services to
   _____ Child Care
   _____ 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.)?

Revised on 11/27/15
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.

Revised on 11/27/15