Court of Common Pleas

Juvenile Division, Lucas County, Ohio

Denise Navarre Cubbon, Administrative Judge Linda M. Knepp, Judge



LUCAS COUNTY CASA ADVISORY BOARD APPLICATION

| Today's Date: | Name: | | | | | | |
|-----------------------------|-------------------|--------------------|----------------|----------------|---------|--------------|----------|
| Your pronouns: | He/His | She/Hers | They/ | Their | Othe | r: | |
| Race/Ethnicity: Lucas Cou | nty CASA actively | seeks diverse vo | olunteers from | n all walks of | f life. | Alaska Nativ | /e |
| African American | Asian Caucas | ian Latino/H | ispanic 1 | Multi-Racial | Nativ | e American | Other |
| Home Address: | | | | | | | |
| Cell Phone: | Work | Work Phone: Home F | | Phone: | | | |
| Home Email: | | | Work Email: | | | | |
| May we call you at work? | Yes N | o May we | e email you a | t work? | Yes | No | |
| Name of Employer: | | , | lob Title: | | | | |
| Education: Post Grad Degree | Undergrad | uate Degree | Atte | nded Colleg | e | High Sch | ool Grad |
| University/College(s):_ | | | | | | | |
| Degree(s) In: | | | | | | | |
| Other Community Invo | olvement: | | | | | | |
| Name other boards on | which you serve | e or have serve | d and the da | ates of servi | ce: | | |
| | | | | | | | |
| | | | | | | | |
| List community organiz | ations to which | you belong: | | | | | |
| What skills would you l | bring to the Luca | as County CASA | Advisory Bo | pard? | | | |
| Do you have fundraisi | ng experience? | Yes | No | | | | |

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| Are you able to make a 3-year commitment to serve? | Yes No |
|--|----------------------------|
| Do you have history with any child protective services agency? | *Yes No |
| *If "Yes" please explain: | |
| | |
| | |
| | |
| Have you ever been convicted in a court of law? *Yes | No |
| | NO |
| *If "Yes" list offenses and dates: | |
| | |
| | |
| | |
| Have you ever been involved in a demostic violence incident of a | ay kind? *Vac Na |
| Have you ever been involved in a domestic violence incident of a *If "Yes" please explain: | ny kind? *Yes No |
| The rest please explain. | |
| | |
| | |
| | |
| How did you learn of the CASA advisory board? | |
| | |
| | |
| | |
| On which advisory board committee would you be interested in s | erving? |
| Nominating/Code of Regulations | Public Relations/Marketing |
| Special Events/Fundraising | Volunteer Enhancement |
| Finance | Any Committee is Fine |

LUCAS COUNTY CASA ADVISORY BOARD APPLICATION

| Applicant's Name: | |
|--------------------------|--|
| | |
| | |

YES, you may send for my references before the LCCS and background checks are received.

NO, wait for LCCS and background checks to be returned before sending out references.

PLEASE DO NOT INCLUDE FAMILY MEMBERS AS REFERENCES

| REFERENCE #1 Name: | | | |
|-------------------------------|----------|------------|--------------|
| Address: | | | |
| State: | Zipcode: | | |
| Reference's EMAIL (required): | | | |
| How do you know this person?_ | | | Years Known: |
| REFERENCE #2 Name: | | | |
| Address: | | City: | |
| State: | Zipcode: | Telephone: | |
| Reference's EMAIL (required): | | | |
| How do you know this person? | | | Years Known: |
| REFERENCE #3 Name: | | | |
| Address: | | City: | |
| State: | Zipcode: | | |
| Reference's EMAIL (required): | | | |
| How do you know this person? | | | Years Known: |



LUCAS COUNTY CASA ADVISORY BOARD APPLICATION

Lucas County CASA Advisory Board, Inc. RELEASE OF INFORMATION

I hereby give my informed consent to the Lucas County Juvenile Court (LCJC) Court Appointed Special Advocates/Guardian ad Litem (CASA/GAL) department to complete a thorough investigation of my character and fitness to be a Lucas County CASA Advisory Board member. I understand that by signing this release, I authorize inquiries to be made concerning my suitability as a Board member to references that I have provided. I further authorize FBI, national, state, and/or local police record checks, Bureau of Criminal Investigation checks, sexual offender registry checks, mental health inquiries and child protective services agencies history checks. Child protection services agencies will be asked for information about any time my name appears in their records as an alleged perpetrator of child abuse or neglect. Also, child protective services agencies will be asked to share any additional relevant information where my name appears in their records.

I understand that information requested in this application and other information that my otherwise be obtained will be used only for the purpose of deciding my fitness and suitability to serve as a Lucas County CASA Advisory Board member, and may be shared with other departments of the Lucas County Juvenile Court.

This release is good until revoked by me, in writing, at any time before it has been acted upon.

Criteria used in the selection of Lucas County CASA Advisory Board members will be such as to ensure that the individual is able to meet the responsibilities of a Lucas County CASA Advisory Board member, and maintain the reputation of credibility of the CASA program.

No individual will be rejected because of race, color, religious creed, sexual orientation, national origin, sex, handicap, age (if at least 21), or marital status.

| Applicant's TYPED Signature*: | | Date: |
|---|--|---|
| | checking this box, I attest that I am the A is accurate, honest, and complete. | Applicant and Preparer of this document and Preparer's Initials: |
| Date of Birth: | _ Social Security Nur | mber: |
| OR you may choose to send it by fax to 41 | 19-213-6785. Please include a copy of yo | ay send it by email to casaforms@co.lucas.oh.us, our driver's license and proof of current auto ground checks that wll not accept an electronic |
| Application Rec'd in CASA Office: | | |
| Date: | | |

Lucas County CASA Advisory Board, Inc.





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| Full Legal Name (Please Print): | Date: | |
|---------------------------------|-------------------------|--|
| | | |
| Date of Birth: | Social Security Number: | |