



**Court of Common Pleas  
Juvenile Division, Lucas County, Ohio**

Linda L. Knepp, Administrative Judge  
Amy E. Stoner, Judge



**Lucas County CASA Advisory Board Application**

Today's Date: \_\_\_\_\_ Name: \_\_\_\_\_

Your Pronouns:    ☐ He/His    ☐ She/Her    ☐ They/Their    ☐ Other: \_\_\_\_\_

RACE/ETHNICITY:

☐ Alaska Native   ☐ African American   ☐ Asian   ☐ Caucasian   ☐ Latino/Hispanic   ☐ Multi-Racial  
☐ Native American   ☐ Other: \_\_\_\_\_

Phone: (H) \_\_\_\_\_ (C) \_\_\_\_\_ (W) \_\_\_\_\_

Email: (H) \_\_\_\_\_ (W) \_\_\_\_\_

May we call you at work?    ☐ Yes    ☐ No                      May we email you at work?    ☐ Yes    ☐ No

Name of Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_

EDUCATION:

☐ Post-Grad Degree    ☐ Undergraduate Degree    ☐ Attended College    ☐ High School Graduate

University/College(s): \_\_\_\_\_

Degree(s) in: \_\_\_\_\_

COMMUNITY INVOLVEMENT:

Name other boards on which you serve or have served and the dates of service:

--

List community organizations to which you belong:

--

Please provide a brief statement as to why you feel you are qualified for this position and what skills you would bring to the Lucas County CASA Advisory Board?

Do you have fundraising experience?      ☐ Yes      ☐ No

Are you willing to assist with fundraising?      ☐ Yes      ☐ No

Are you able to make a three-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 charged with a criminal offense or convicted in a court of law?      ☐ Yes\*      ☐ No

\*If "Yes" list offenses and dates:

Have you ever been involved in a domestic violence incident of any kind?      ☐ Yes\*      ☐ No

\*If "Yes" please explain:

How did you learn of the CASA Advisory Board?

On which Advisory Board Committee would you be interested in serving?

<input type="checkbox"/> Nominating/Code of Regulations	<input type="checkbox"/> Special Events/Fundraising
<input type="checkbox"/> Finance	<input type="checkbox"/> Public Relations/Marketing
<input type="checkbox"/> Volunteer Enhancement	<input type="checkbox"/> Any Committee

## REFERENCES

Please list three personal references in the space provided below.

PLEASE DO NOT INCLUDE FAMILY MEMBERS AS REFERENCES.

**Applicant's Name:** \_\_\_\_\_

REFERENCE #1 Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zipcode: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email (*required*): \_\_\_\_\_

How do you know this person? \_\_\_\_\_ Years Known: \_\_\_\_\_

REFERENCE #2 Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zipcode: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email (*required*): \_\_\_\_\_

How do you know this person? \_\_\_\_\_ Years Known: \_\_\_\_\_

REFERENCE #3 Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zipcode: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email (*required*): \_\_\_\_\_

How do you know this person? \_\_\_\_\_ Years Known: \_\_\_\_\_

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, and child protective services agencies history checks. Child protective 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 may 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, gender, handicap, age (if at least 21), or marital status.

Applicant's TYPED Signature\*: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_ *\*By typing my name above and checking this box, I attest that I am the Applicant and Preparer of this document and all information contained herein is accurate, honest, and complete.* Preparer's Initials: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

**INSTRUCTIONS:** After saving the completed application to your computer, you may send it by email to [casafoms@co.lucas.oh.us](mailto:casafoms@co.lucas.oh.us), OR you may choose to send it by fax to 419-213-6785. Also required is a hand-written signature of this page for certain background checks that will not accept an electronic signature (complete page 5).

# Lucas County CASA Advisory Board, Inc.

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Full Legal Name *(Please Print)*: \_\_\_\_\_ Date: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

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