



SOS CASA of the Flint Hills

25 West 5th Ave.

Emporia, KS 66801

(620) 343-2744

fax (620) 343-3070

csanchez@soskansas.com

Thank you for your interest in the Court Appointed Special Advocate (CASA) program. There are many children who need an advocate and we are hopeful that you can assist them by becoming a CASA volunteer.

Enclosed you will find the CASA application packet along with necessary release forms. We will begin to process your application as soon we receive these forms, should you decide to volunteer for CASA.

In order to protect children and provide the court with qualified volunteers, a fingerprint based national criminal history record investigation will be conducted on every applicant. The Office of Judicial Administration will submit your fingerprints and receive the report on your criminal history investigation. Applicants determined ineligible to serve as volunteers based on their criminal history background investigation will have the opportunity to verify their identity with the Kansas Bureau of Investigation. Applicants who do not provide fingerprints for CHRI will not be approved to serve as CASA or CRB volunteers.

The next step will be for us to meet. I am looking forward to hearing from you! Please also feel free to call our office if you have any questions or concerns that you would like to discuss about our program or the application process. On behalf of the children we serve, thank you again for your interest in becoming a CASA volunteer.

Sincerely,

Corina Sanchez
Advocate Coordinator

Frequently Asked Questions about CASA

What is a CASA volunteer advocate?

A Court Appointed Special Advocate (CASA) is a trained citizen who is appointed by a judge to represent the best interests of a child in court.

All of the children served by CASA are victims of abuse and neglect.

What is the role of a CASA?

A CASA provides a judge with carefully researched background details about the child to help the court make a sound decision about that child's future.

Each case is as unique as the child involved. The advocate evaluates the child's situation to recommend whatever is in the child's best interest. The advocate follows through on the case until it is permanently resolved.

How do CASAs investigate a case?

The CASA talks with the child, parents, family members, social workers, school officials, health providers and others who are knowledgeable about the child's history. The CASA also reviews all records pertaining to the child—school, medical, case worker reports and other documents.

How are CASAs different from social service caseworkers?

Social workers generally are employed by state governments sometimes working on as many as 60 to 90 cases at a time; they are frequently unable to conduct a comprehensive investigation of each case. The CASA has more time and a smaller caseload to work (CASAs typically are only assigned to 1 case at a time.) The CASA does not replace a social worker on a case; they are an independent appointee of the court. The CASA thoroughly examines a child's case, knows about various community resources and makes recommendations to the court independent of state agency restrictions.

How is the CASA different from the child's attorney?

The CASA does not provide legal representation in the courtroom—that is the role of the attorney. However, the CASA does provide crucial background information that assists attorneys in presenting their cases. It is important to remember that CASAs do not represent a child's wishes in court. Rather, they speak through their court report for the child's best interests.

Is there a "typical" CASA?

Our advocates come from all walks of life and possess a variety of professional, educational and ethnic backgrounds. There are no special educational requirements or prior knowledge of social welfare issues required to become a CASA. Many CASAs are full-time employed, others are retired, some are students, and both men and women are CASAs. CASAs must be at least 21 years old, and CASA is pleased to host advocates from age 21 up.

How do CASAs help children?

CASAs offer children trust and advocacy during complex legal proceedings. They help explain to the child the events happening involving the case, reasons they are in court and the roles of the judge, lawyers and case workers. While remaining objective observers, CASAs also encourage the child to express his or her own opinion and hopes about the case. Comparatively, in like cases, children who have had a CASA representing their best interests tend to see less time in foster care. The children are provided with more tailored services to meet their unique needs, and are provided with a consistent adult with whom they can develop a trusting relationship. Because CASAs are trained to advocate for the child's needs, the CASA continually assesses the child's situation, and identifies appropriate resources to benefit the child. Children who have a CASA are also more likely to find a permanent home.

Do lawyers, judges and social caseworkers support CASA?

Yes. Juvenile and family court judges implement the CASA program in their courtrooms and appoint volunteers. CASA has been endorsed by the American

Bar Association, the National Council of Juvenile and Family Court Judges, and the Office of Juvenile Justice and Delinquency Prevention of the U.S. Department of Justice. The federal government also supports CASA, making CASA a priority project of the Department of Justice's Office of Juvenile Justice and Delinquency Prevention.

How much time is required to volunteer?

Each case is different. A CASA volunteer usually spends about 10 hours doing research and conducting interviews prior to the first court appearance. More complicated cases can take longer. Once initiated into the system, volunteers work about 10 hours a month.

The volunteer continues until the case is permanently resolved. One of the primary benefits of the CASA program is that, unlike other court principals who often rotate cases, the CASA volunteer is a consistent figure in the proceedings and provides continuity for a child. CASA requires a 2 year commitment.

Are there other agencies or groups providing a similar service?

No. There are other child advocacy organizations, but CASA is the only program where volunteers are appointed by the court to represent a child's best interests.

How many children are in need of a CASA in Kansas?

At any given time, half a million children are in foster care nationwide. About 50,000 children in Kansas have been removed from their homes and could benefit from a CASA's advocacy.

To join our e-mailing list for the latest CASA news, contact us!

CASA JOB DESCRIPTION

It is the policy of SOS Inc. to provide equal employment and volunteer opportunities to all persons without regard to race, color, creed, ancestry, ethnic or national origin, age, religion, sex, sexual orientation, marital or parental status, economic status, education, disability, and Veteran status.

QUALIFICATIONS

- ❖ Be at least 21 years of age
- ❖ Ability to keep all client and court information strictly confidential
- ❖ Ability to communicate effectively both orally and in writing
- ❖ Ability to respect and relate to people from various backgrounds (economic, cultural, educational) in a variety of settings
- ❖ Ability to deal with hostility, anger and other emotional attitudes
- ❖ Ability to maintain objectivity and impartiality
- ❖ Ability to gather and record factual information accurately
- ❖ A basic understanding of child development and family relationships

I understand that it shall be my duty to fulfill the following requirements:

PRE-SERVICE

- ❖ Complete application and submit to screening process
- ❖ Attend all pre-service training, approximately 30 hours; notify staff if unable to attend so that other arrangements can be made
- ❖ Observe a minimum of 2 court hearings prior to being appointed to first case

DUTIES

- ❖ Complete an intensive independent review of each case:
 - Review appropriate records and reports, gathering all pertinent information
 - Interview all relevant parties; maintain regular contact with pertinent individuals such as case managers, teachers, therapists, parents, etc.
 - Maintain adequate contact with the child in order to build and sustain rapport, at least monthly
 - Observe the child and significant others
- ❖ Report findings to the court:
 - Provide an electronic version of a written report containing factual information and recommendations at least 14 days before scheduled court hearings
 - Attend court hearings concerning the child
 - Participate in case conferences concerning the child
- ❖ Ensure representation of the child's best interest:
 - Attend all court hearings to see that all relevant facts are presented
 - Attend appropriate interagency meetings regarding the child
 - Ensure that appropriate services are being provided to the child and family
 - Prod public systems into action
- ❖ Maintain up-to-date, complete records about the case, including appointments, interviews, and information gathered about the child and the child's life circumstances
- ❖ Monitor implementation of court orders and case plan tasks
- ❖ Encourage permanency planning and family reunification

- ❖ Consult regularly with program staff, including:
 - Turn in monthly contact reports by the 10th of each month
 - Keep program staff informed of all activities and important developments related to CASA
 - Attend monthly volunteer meetings
 - Provide any information requested by staff that may be needed for overall program evaluation
 - Return phone calls and other correspondence from staff
 - Receive direct supervision and guidance from program staff
- ❖ Follow standards and guidelines established by the National CASA Association and the Supreme Court of the State of Kansas
- ❖ Return entire file, including case notes and other documents, to the CASA office when case is completed
- ❖ Maintain strict confidentiality, even following case closure
- ❖ Attend twelve hours of annual in-service training

TIME COMMITMENT

- ❖ Commit to a minimum of two years of service
- ❖ Be available for case assignment and accept cases unless other arrangements have been made

I understand that I must complete the volunteer application and submit to the screening process, including but not limited to background checks, a personal interview, and references. I understand that refusal to submit to the screening process will result in rejection of my application. I also understand that program staff reserves the right to evaluate my CASA performance on an as needed basis.

CASA Signature

Date



Kansas CASA Volunteer Application

Applicant Information

Name					
Street Address					
Mailing Address					
City		State		Zip Code	
County					
Home Phone					
Cell Phone					
Business Phone					
May you be called at work?					
E-Mail Address					
Social Security Number					
Date of Birth					
Gender					
Race		Ethnicity			
Do you have access to a vehicle?		License Tag #			
Insurance Policy #		Vehicle Insurance Company			
Are you a citizen of the United States?		An Alien Resident?			

Work/Volunteer History

Present Employer/Volunteer Supervisor	
Address	
Phone	
Job Description	
Dates of Employment	

Previous Employer/Volunteer Supervisor	
Address	
Phone	
Job Description	
Dates of Employment	

Previous Employer/Volunteer Supervisor	
Address	
Phone	
Job Description	
Dates of Employment	

Education/Training

Highest level of education completed?	
Other educational/training programs completed?	

Do you have work experience and/or training in any of the following areas?

Art/Graphics		Health Care		Criminology	
Child Care		Law Enforcement		Drug/Alcohol Abuse	
Child Development		Mental Health		Education	
Counseling		News/Media		Writing	
Psychology		Public Speaking		Social Work	
Juvenile Court		Foreign Languages		Working with Children	

If yes to any of the above, please describe:

Legal History

Note: It is important that you be thorough and honest in giving of these answers. Answers which are found to be untrue may disqualify you as a potential volunteer.

Have you ever been arrested and/or charged of a crime?	Yes or No
Have you ever been convicted of a crime?	Yes or No
Have you ever been placed on a diversion?	Yes or No
Have you ever had a conviction, adult or juvenile, expunged from your record?	Yes or No
Have you ever been involved in a juvenile case as an adult or a child?	Yes or No
Have you ever been the subject of a child abuse/neglect investigation?	Yes or No
Do you have any experience with child abuse/neglect?	Yes or No

If you answered YES to any questions, please explain:

Emergency Contact

Name				
Street Address				
City		State		Zip Code
Home Phone				
Work Phone				
E-Mail Address				

Personal References

Please print names, addresses, and phone numbers of people who have known you for at least two (2) years, who know you well, can address how you relate to children and others, and how well you could fulfill the responsibilities of a CASA. The CASA program staff will contact the references you list. PLEASE DO NOT INCLUDE RELATIVES.

Name				
Relationship				
Length of Acquaintance				
Daytime Phone				
Address				
City		State		Zip Code
E-Mail Address				

Name				
Relationship				
Length of Acquaintance				
Daytime Phone				
Address				
City		State		Zip Code
E-Mail Address				

Name				
Relationship				
Length of Acquaintance				
Daytime Phone				
Address				
City		State		Zip Code
E-Mail Address				

Adults Living in Your Home

Name	
Relationship	
Name	
Relationship	
Name	
Relationship	
Name	
Relationship	

Notice of Screening Procedures

In order to protect children and provide the court with qualified volunteers, a fingerprint-based national criminal history record investigation will be conducted on every applicant, as well as screening through the Department of Children and Families (DCF) Child Abuse and Neglect Central Registry.

The Office of Judicial Administration will submit the applicant's fingerprints to Kansas Bureau of Investigation (KBI) for a Criminal History Record Inquiry. The KBI will provide a report on the applicant's criminal record investigation to the Office of Judicial Administration. Applicants found to have been convicted of, or charges pending for, a felony or misdemeanor involving sex offense, child abuse or neglect, or related acts that would pose risks to children or the CASA program's credibility will not be approved for service. Applicants who do not provide fingerprints for criminal history background checks will not be approved to serve as a CASA.

The applicant's local CASA program will make inquiries to the DCF Child Abuse and Neglect Central Registry and registries of other states where the applicant has lived in the past five years. If it is found that DCF or a similar agency in another state lists the applicant as the perpetrator of an act of child abuse or neglect the CASA program will generally disallow certification.

All information will be held in strict confidence. Criteria used in the selection of a volunteer will be such as to ensure that the individual is able to meet the responsibilities of a CASA. **NO INDIVIDUAL WILL BE REJECTED BECAUSE OF RACE, COLOR, RELIGIOUS CREED, NATIONAL ORIGIN, ANCESTRY, GENDER, AGE, DISABILITY OR MARITAL STATUS.**

I have read and agree to the above and certify that the information contained in the CASA Volunteer Application is correct and accurate to the best of my knowledge.

Applicant's Signature _____ Date _____

WAIVER AGREEMENT AND STATEMENT
Fingerprint-Based Record Checks for Noncriminal Justice Purposes

I hereby authorize (*Name of Authorized Recipient*) The Office of Judicial Administration to submit a set of my fingerprints to the Kansas Bureau of Investigation (KBI) for the purpose of identifying me and accessing and reviewing Kansas and/or national criminal history records that may pertain to me. Pursuant to K.S.A. 22-4701 et seq. and K.S.A. 22-5001, the Authorized Recipient may obtain my criminal history record information for noncriminal justice purposes. By signing this waiver, it is my intent to authorize release to the above-referenced Authorized Recipient of any Kansas and/or national criminal history record that may pertain to me. I further understand that, if applicable, the Authorized Recipient may choose to deny me unsupervised access to children, the elderly, or individuals with disabilities until the criminal history background check is completed.

I understand that, upon my request, the Authorized Recipient will provide me a copy of the criminal history background report, if any, received on me, and that I am entitled to challenge the accuracy and completeness of any information contained in any such report. I may be afforded a reasonable amount of time to correct or complete the criminal history record (or decline to do so) before the Authorized Recipient makes a final decision about my status as an employee, volunteer or contractor, or my eligibility for any pertinent license, certification or registration, or adoption. See 28 CFR 50.12(b).

I understand that officials receiving the results of the criminal history record check are to use those results only for authorized purposes and are prohibited from retaining or disseminating such results in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council. (See 5 United States Code (USC) 552a(b); 28 USC 534(b); 42 USC 14616, Article IV(c); 28 CFR 20.21(c), 20.33(d), and 906.2(d).)

I have ____ **OR** have not ____ been convicted of a crime.

If convicted, describe the crime(s), the date and location of the crime(s), and the name of the convicting court:

Under penalty of perjury, I hereby declare that I am the person described below, and understand that any falsification of this statement constitutes a severity level 9, nonperson felony under the provisions of Title 21 Kansas Statutes Annotated, Section 3805.

Signature

Date

Printed Name

Date of Birth

Residential Address

City

State

Zip

WAIVER AGREEMENT AND STATEMENT (Cont.)
Fingerprint-Based Record Checks for Noncriminal Justice Purposes

**RIGHT TO OBTAIN AND CHALLENGE ACCURACY
OF CRIMINAL HISTORY RECORDS**

To obtain a copy of your Kansas criminal history record information (CHRI) to review for accuracy and completeness, you must send a set of your fingerprints, a letter requesting your record and payment of the appropriate fee to the KBI. For further details, including the current fee, visit the following Internet website: <http://www.kansas.gov/kbi/criminalhistory>. Or, to provide official court documents to make a correction you may write to:

Kansas Bureau of Investigation
Attn: Criminal History Records
1620 SW Tyler
Topeka, Kansas 66612-1837

If a change is made to your Kansas criminal history record due to a challenge, a new copy of your Kansas criminal history record will be sent to the Authorized Recipient to make a final decision about your status as an employee, volunteer or contractor, or your eligibility for any pertinent license, certification or registration, or adoption.

To obtain a copy of your federal CHRI for review and challenge you must submit a set of your fingerprints and the appropriate fee to the FBI. Information regarding this process may be obtained at: http://www.fbi.gov/about-us/cjis/background-checks/background_checks. Or, you may write to:

FBI CJIS Division – Record Request
1000 Custer Hollow Road
Clarksburg, West Virginia 26306

The FBI will forward your challenge to the appropriate contributing agency to verify or correct the entry. Upon receipt of an official communication directly from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency (see 28 CFR 16.30 through 16.34). The Authorized Recipient must submit a new set of fingerprints and fee to receive the updated federal criminal history record.

TO BE COMPLETED BY THE FINGERPRINTING AGENCY:

Method of Verifying Identity: Driver's License State Issued ID Card
 Military ID Card

State/Branch: _____ ID Number: _____

Agency Name: _____

Address: _____

Telephone: _____ Fax: _____

Name of Individual Verifying Identity: _____

ORIGINAL – MUST BE RETAINED BY AUTHORIZED RECIPIENT
COPY – PROVIDED TO SUBJECT OF CRIMINAL HISTORY RECORD CHECK

**Office of Judicial Administration
Criminal History Record Inquiry**

Judicial District	5 th Judicial District		
Program Name	SOS CASA of the Flint Hills		
Program Type	<input checked="" type="checkbox"/> CASA	<input type="checkbox"/> CRB	

NAME	First	Middle	Last

Maiden Name	
Also Known As	

Date of Birth		Height	
Place of Birth (City, State, Country)		Weight	
Social Security Number		Color of Hair	
Ethnicity (Hispanic or Non-Hispanic)		Color of Eyes	
Race		Gender	

Please list your address(es) for the past 5 years and approximate dates at residence.

Street Address	City	State	Zip	Dates

Street Address	City	State	Zip	Dates

Street Address	City	State	Zip	Dates

Street Address	City	State	Zip	Dates

In order to protect children and provide the court with qualified volunteers, a fingerprint based national criminal history record investigation will be conducted on every applicant. The Office of Judicial Administration will submit your fingerprints and receive the report on your criminal history investigation. Applicants determined ineligible to serve as volunteers based on their criminal history background investigation will have the opportunity to verify their identity with the Office of Judicial Administration and to appeal this determination with the Chief Judge of the Judicial District or his or her designee. Applicants who do not provide fingerprints for criminal history background checks will not be approved to serve as CASA or CRB volunteers.

I understand that the information obtained through the Criminal History Record Inquiry will be confidential and for the exclusive use of determining eligibility for the CASA or CRB program.

Signed _____ Date _____

For use by the Office of Judicial Administration Only

Request Sent	Entered by

Child Abuse and Neglect Central Registry
Release of Information

All releases and fees should be sent via postal mail to the attention of: **DCF, Child Abuse and Neglect Central Registry, P.O. Box 2637, Topeka, KS 66601.**

Please complete the information below by printing legibly in ink. All requested information is required to process this request. Incomplete information (blank spaces) will result in the release not being processed and returned. The release may be re-submitted with all requested information.

CONFIDENTIALITY: *Kansas Department for Children and Family records are confidential. No individual, association, partnership, corporation, or other entity shall willfully or knowingly disclose, permit, or encourage disclosure of the contents of records or reports in violation of the confidentiality requirements of K.S.A. 38-2209. Violation of this statute is a class A nonperson misdemeanor and the court may impose a civil penalty of up to \$1,000.*

I, _____, give permission for the release of any information concerning
(Please print complete first, middle and last name)
myself in the Child Abuse and Neglect Central Registry to:

A. Contact Person:	Corina Sanchez
Agency Name:	SOS CASA of the Flint Hills
Mailing address:	25 W. 5th Ave. Emporia, KS 66801
Phone Number:	(620) 343-2744

I understand that all information released will be for the exclusive and confidential use of the above named organization/person/agency. I give permission for the release of any information concerning myself in the Child Abuse and Neglect Central Registry each year while I am employed or associated with the above agency.

Yes No

First, Middle and Last Name: _____

Maiden Name: (Female applicant only) _____

Married Names, Nicknames or Other Names Used: (Use N/A if no other names used) _____

Date of Birth: _____

Race: _____

Social Security #: _____

Gender: Male Female

Current Address: _____

Signature: _____

Date: _____

Each request must be submitted with payment prior to the request being processed. Please attach appropriate fee of \$10.00 per release of information. The following state agencies are exempt from the \$10.00 fee: KDOC-JS (Administrative Office or Facilities), KNI, Dept. Of Education- Administrative Office, KDHE, KDADS, State Hospitals, State Correctional Institutions, Tribal Authorities, Attorney General's Office, Kansas School for the Blind, Kansas School for the Deaf, Child Welfare agencies in other states. Sub-contracting agencies are not exempt and will be assessed the \$10.00 fee.

Mentor record checks, i.e. Big Brothers Big Sisters, are exempt from the \$10.00 fee. For a complete list of Mentor Programs, go to: <http://community.ksde.org/Default.aspx?tabid=5194>. If this is a mentor record check, please make sure the box below is checked.

Mentor Program: **If yes, please check**

For Central Registry Use Only

_____ FEE ATTACHED

Authorization to Release Social Security Number (SSN) Verification

Printed Name:	Date of Birth:	Social Security Number:
Address:	City/State/Zip:	
Alias:		

I am the individual to whom the Social Security number was issued. I declare and affirm that the information contained herein is true and correct. I authorize First Advantage to verify my name and SSN to SOS CASA of the Flint Hills and/or their agent for the purpose of volunteer or employment background screening.

Signature:	Date Signed:
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SOS CASA Background Check

I _____, give permission for the release of information concerning myself in the Emporia Police Department and/or Lyon County Sheriff's Office database(s) to:

SOS CASA of the Flint Hills
 25 W. 5th Ave
 Emporia, KS 66801

I understand that all information released will be for the exclusive and confidential use of the above named organization/agency. I give permission for the release of any local records concerning myself for each year that I am affiliated with SOS CASA of the Flint Hills.

Full Name:

Alias/Maiden Name:

Date of Birth:

Driver's License Number:

Social Security Number:

I am the individual to whom this information pertains. I declare and affirm that the information contained herein is true and correct. I authorize Lyon County Emergency Communications Center to release information pertaining to arrests, charges, and convictions from the past **seven (7) years** to SOS CASA of the Flint Hills and/or their agent for the purpose of volunteer or employment background screening.

Signature:

Date:

Date Received:		Received By:	
	NCIC W/W	LOCAL W/W	LOCAL CHRI
CHECKED BY:			
DATE:			
Date Returned:		Returned By:	