



Young Professionals Board

Application

ABOUT US

Child and Family Advocates of Cuyahoga County (CFACC) is pleased to announce that it is accepting applications for a new Young Professionals Board (YPB), or group of 5-6 dynamic local professionals who may be seeking leadership or community service opportunities with at-risk youth, and who will be selected to serve in a non-governing capacity with CFACC.

The main role of this new board will be to serve as community-based ambassadors for the Court Appointed Special Advocate (CASA) program, which provides volunteer advocates for local children and youth vulnerable to abuse, neglect, dependency, and aging-out of the foster care system. The YPB will also provide advisory/practical assistance to the organization, such as marketing, community outreach and event planning.

Candidate Requirements:

- Employed College Graduate - Ages: 22-35
- Submit an Application (Resume, References and Background Checks are Required)
- Complete the CASA Program Orientation
- Attend Quarterly Board Meetings and Program Events
- Actively Participate in Marketing, Event Planning, Community Outreach, and Recruitment Activities

Submission Options:

Mail: CFACC, 12200 Fairhill Road, Suite E193
Cleveland, OH 44120

Scan and eMail: info@cfadvocates.org

Mission: To make a difference for every child served through advocacy, education and collaborative alliances.

Vision: Every child is seen, heard, and engaged, leading to permanency and hope.

YOUNG PROFESSIONALS BOARD **APPLICATION**

Thank you for your interest in serving on the Young Professionals Board at CFACC. Please complete the application below and attach your resume as indicated. Your application will be reviewed by the Board of Directors and you will be contacted by a board member for an interview. Please email info@cfadvocates.org with any questions.

ABOUT **YOU**

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Last Name

First Name

Middle Name

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Street Address

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Street Address 2

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City

State/Province

Zip Code

--	--	--

Date of Birth

Primary Number

Email Address

EDUCATION AND **EMPLOYMENT**

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Name of College/University

Major/Minor

Graduation Year

--	--	--

City

State/Province

Zip Code

--	--	--

Name of College/University

Major/Minor

Graduation Year

--	--	--

City

State/Province

Zip Code



EDUCATION AND EMPLOYMENT

--	--

Name of Current Employer

Title or Position

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City

State/Province

Zip Code

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Name of Previous Employer

Title or Position

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City

State/Province

Zip Code

Does your employer offer any of the following:

- Corporate Sponsorships Matching Gifts Non-Profit Grant Opportunities

OPTIONAL INFORMATION

Information regarding gender, ethnic origin and race are optional. The information is requested for program report generation only and in no way affects your selection for Young Professionals Board.

Gender Identity: Male Female Other: _____

Ethnic Origin: Hispanic Non-Hispanic Not Indicated

Race (Choose One or More): White Black or African American Asian

American Indian or Alaskan Native, Hawaiian or Other Pacific Islander

APPLICATION QUESTIONS

How did you learn about Young Professionals Board?

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APPLICATION QUESTIONS

Why are you interested in serving and what do you want to get out of the experience?

What skills, experiences and resources will you bring to the Young Professionals Board?

Please provide any previous experience working in a leadership capacity within a committee or organization?

What ideas do you have for supporting our mission - awareness events, fundraising events, networking, consulting, etc.?

REFERENCES (A MINIMUM OF 3 REFERENCES UNRELATED TO THE APPLICANT REQUIRED)

NAME	EMAIL	PHONE
ADDRESS	CITY/STATE	ZIP

NAME	EMAIL	PHONE
ADDRESS	CITY/STATE	ZIP

NAME	EMAIL	PHONE
ADDRESS	CITY/STATE	ZIP

NAME	EMAIL	PHONE
ADDRESS	CITY/STATE	ZIP

CHILD AND FAMILY ADVOCATES OF CUYAHOGA COUNTY BACKGROUND CHECK AUTHORIZATION FORM

A criminal and civil background check, including a sex offender registry check and children's services agency services check, is required for Court Appointed Special Advocate volunteers in Cuyahoga County Juvenile Court. This check into official public records will determine the existence or non-existence of any record of criminal convictions and civil actions.

Child and Family Advocates of Cuyahoga County maintains the right to conduct these background checks on any Cuyahoga County court Court Appointed Special Advocate applicant through a third party agency, Open Online LLC. None of the information provided on this form will be used to discriminate against any applicant on the basis of race, color, marital status, religion, sex, national origin, age (over 21), disability or genetics.

By signing this form, the applicant authorizes Child and Family Advocates of Cuyahoga County and/or its designated third party to conduct the necessary background checks initially in addition to a new background check every four years as required by National CASA Standards and grant funders. In addition, the applicant acknowledges that any false or misleading statement, omission or failure to disclose information may disqualify the applicant from serving as a Court Appointed Special Advocate in the Cuyahoga County Juvenile Court.

Any applicant 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 children or to the Child and Family Advocates of Cuyahoga County program's credibility is not eligible to be a Court Appointed Special Advocate.

By signing this form, the applicant acknowledges that if for any reason it becomes apparent that the applicant's activities are contrary to the policies, goals and/or philosophy of Child and Family Advocates of Cuyahoga County and its ability to provide quality services to abused and neglected children, the applicant's services as a Court Appointed Special Advocate may be terminated.

The applicant certifies that the statements on this application are true, complete and correct to the best of the applicant's knowledge. The applicant understands that falsification on this application can disqualify the applicant from consideration or can result in dismissal at a later time.

Background Check Verification Information

Full Name _____	Maiden Name _____
Other Names _____	Other Names _____
Date of Birth _____	Social Security # _____

List any previous addresses within the last 10 years (attach additional sheet if necessary)

Address	City	State	Zip Code
Address	City	State	Zip Code
Address	City	State	Zip Code
Address	City	State	Zip Code
Address	City	State	Zip Code

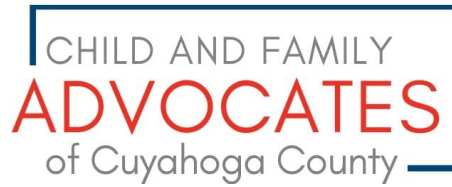
**List all persons currently living in your home (i.e., spouse, children, other family members, friends, etc).
NOTE: please list your biological/adopted children regardless if they are living in your home or are over 18 years of age.**

First, Middle, and Last Name	Date of Birth	Relationship	Living In Home?

I certify that the information provided is true and correct to the best of my knowledge.

Type Name

Date



12200 Fairhill Road | Suite E193, Cleveland, Ohio 44120
216.296.3799 | info@cfadvocates.org | cfadvocates.org

OHIO'S SACWIS ALLEGED PERPETRATOR SEARCH CONSENT FORM

Child and Family Advocates of Cuyahoga County (CFACC) requires staff, volunteers, and board members to complete the OHIO SACWIS (Statewide Automated Child Welfare Information System) Alleged Perpetrator Search as part of the background and screening process. Ohio's SACWIS Registry is a confidential database containing allegations of reports of child abuse and neglect and the parties involved. This search confirms whether an individual has been named an Alleged Perpetrator for a Substantiated or Indicated report of child abuse or neglect. This search is required to be completed initially and every four years per program policies. CFACC will complete this search on your behalf and results shall be returned to Hannah Wiltshire, Program Director, at hwiltshire@cfadvocates.org.

Name of individual to be searched:

First Name	Middle Name	Last Name
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By signing and dating this consent form I certify that the information provided for the Ohio SACWIS Alleged Perpetrator Search is true and correct to the best of my knowledge. I understand the nature of the search to be conducted. I was given the opportunity to ask questions pertaining to this search. I am competent to consent to the search being completed. I authorize the Ohio Department of Job and Family Services (ODJFS) to release the search results to Child and Family Advocates of Cuyahoga County.

Signature	Date
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REFERENCE FORM

Applicant's Name:

Reference's Name & Contact Information

Name:

Phone:

Email:

Please rate your answers based on the scale below (Click in box for selection):

1 Strongly Agree 2 Agree 3 Disagree 4 Strongly Disagree 5 Unsure/Don't Know

1. I know the applicant well.

1 2 3 4 5

2. The applicant demonstrates an ability to be adaptable to various circumstances.

1 2 3 4 5

3. The applicant demonstrates an ability to assume responsibility.

1 2 3 4 5

4. The applicant demonstrates the ability to complete projects and activities.

1 2 3 4 5

5. The applicant demonstrates the ability to handle confidential information.

1 2 3 4 5

6. The applicant is able to handle stressful situations in a composed manner.

1 2 3 4 5

7. The applicant is objective and non-judgmental of the behavior and/or lifestyle of others.

1 2 3 4 5

8. The applicant is respectful of children and their needs.

1 2 3 4 5

9. The applicant has the ability to stand up for children and promote their best interest.

1 2 3 4 5

10. CASA volunteers work with children (infant to eighteen) that are alleged to be or have been found to be abused or neglected. Do you feel the applicant is suited to work with these children? Why or why not?

11. Do you know of any reason this may not be the right type of volunteer opportunity for this applicant?

12. Is there anything in this individual's background that would disqualify him/her from working with children or in the court system?

I recommend this person to be a CASA volunteer:

Yes

No, and why:

Signature:

Date: