



INTERNSHIP APPLICATION

The information on this form will help us assess your qualifications to serve as an intern with CASA of Luzerne County. Please read the directions carefully, and complete all sections of the form. Information provided by you is confidential. If your application is accepted, CASA program staff will contact you to schedule an interview.

Feel free to attach a cover letter and resume (not required). Following a review of your application, a member of our staff will contact you regarding the next steps in the screening process. If you have any questions or concerns, please feel free to contact the office.

Qualifications

| | | |
|---|-----|----|
| Are you at least 21 years old? | YES | NO |
| Do you have a minimum of a high school diploma or equivalent? | YES | NO |

Personal Information

Name: _____

Name as it Appears on Your Driver's License: _____

Pronouns: _____

SSN: _____ Date of Birth: _____

Birth City/State: _____

E-mail: _____ Phone: _____

Street Address: _____

City: _____ State: _____ ZIP: _____

Primary Language: _____

Other Languages and Proficiency Level: _____

Child Welfare Experience

Please tell us about any personal and/or professional experience you, your family, or friends have with the following agencies, organizations or areas. You are not required or expected to have any experience in these areas. ***Skip this section if you are applying for the Marketing Intern position.***

Child Protective Agencies: _____

Foster Care: _____

Juvenile Court: _____

Other Child Service Agencies: _____

Child Abuse or Neglect: _____

Domestic Violence: _____

Mental Illness/Mental Health Treatment: _____

Marketing Experience

Please tell us about any personal and/or professional experience you have with any of the following programs and platforms. ***Skip this section if you are applying for the Child Welfare Intern position.***

Facebook for Non-Profit: _____

Word Press: _____

Square Space _____

Constant Contact: _____

Greater Giving: _____

Other Donor Software: _____

Other Website Platforms: _____

Do you have any concerns about being able to maintain auto insurance? If yes please explain how you will overcome this obstacle.

Criminal History

An applicant having a charge or convictions for a crime involving a sex offense or child abuse or neglect will be rejected. Applicants with other misdemeanor or felony charges or convictions that would not pose a risk to children or negatively impact the credibility of the program will be considered on a case by case basis. Please answer the following questions. If YES, please explain.

Have you ever been convicted of a crime (misdemeanors and/or felonies)? If yes what was the charge? Please list the date and location of the arrest.

Can you think of any reason why the Judge of Dependency Court might be reluctant to allow you to observe hearings? If yes, why?

Preferences

Describe the goals this internship would help you to fulfill.

What are you hoping to learn from this experience?

What is your preference for internship length?

1 Semester

2 Semesters

When are you available to start? _____

How many hours are you available to work on a weekly basis? _____

Personal References

Please provide information for three references (not family members) who can attest to your abilities.

1. _____

2. _____

3.

Authorization

I hereby affirm that all of the answers provided on my application are true. I hereby authorize CASA of Luzerne County and any law enforcement agency that CASA authorizes, to verify my social security number and investigate my background to determine my fitness as an intern. I understand that the information requested in this application will be used only for the purpose of determining suitability as an intern. If unforeseen circumstances prevent me from fulfilling my obligations, I will submit my written resignation to the Advocate Coordinator with as much advance notice as possible. I am aware of the sensitive and confidential nature of the official documents, reports, and other material I will examine in my capacity as an intern. I will only discuss these matters with those people directly involved in the case or who will be consulted for their professional knowledge and expertise. I also understand that the CASA program reserves the right to decline any applicant based on a thorough screening process.

Signature: _____

Date: _____

Please return completed application to:

office@luzernecasa.org