



APPLICATION

CONTACT INFORMATION:

Name:

Address:

City:

State: AL

Zip:

CRP Region: Adams

Email:

**Daytime
Phone:**

Evening Phone:

Best Time to Call:

BACKGROUND INFORMATION:

What systems are you involved in?

Drug and Alcohol

Community Service

Child Protective

Juvenile Probation

Other (Please explain)

Foster Parent

Explain:

Do you have any open cases with child protective services? yes no

Date case closed (if applicable)

(Children and Youth cases must be closed at least one year from the date of application)

What is your occupation?

Please list any special skills, interests or relevant experiences:

What personal or professional experiences, if any, do you have with the child welfare system?

Do you have any special experiences or circumstances that would bring value to a CRP?

yes no

If yes, Please explain:

Are you willing to serve an initial term of two years on the panel?

yes no

Can you commit to attending monthly meetings in your region or virtually?

yes no

INTEREST:

Where did you hear about the citizen review panel?

Why are you interested in volunteering as a CRP member?

What do you hope to get out of this experience?

Do you have any reservations about serving as a volunteer panel member?

yes no

If yes, Please elaborate:

REFERENCES:

Please list the names, complete address including zip code, email address and daytime phone numbers of three non-relatives.

Reference #1:

Name:

Address:

City:

State: AL

Zip:

Email:

Daytime
Phone:

Relationship:

Reference #2:

Name:

Address:

City: **State:** AL **Zip:**

Email:

Daytime Phone: **Relationship:**

Reference #3:

Name:

Address:

City: **State:** AL **Zip:**

Email:

Daytime Phone: **Relationship:**

Signature: (Enter your full name) **Date:**

Once application is complete, please click submit. The review process typically occurs within 2-6 weeks of submission. The Program Coordinator, Meagan Lederman, will be in touch if there are any questions concerning your application.