

PERMANENT HOMES FOR CHILDREN IN GEORGIA
CITIZEN FOSTER CARE REVIEW PANEL APPLICATION
_____ **COUNTY JUVENILE COURT**

Name _____

Address _____

City _____ County _____ Zip _____

Mailing Address (if different) _____

Phone: Home _____ Work _____ Ext. _____

Occupation _____

Employer _____ County _____

Social Security #(optional) _____ Sex _____ Birthday _____

Spouse Name _____ Occupation _____

How did you hear about the Citizen Panel Review Program? _____

Why do you wish to become a panel member? _____

Check if you have any training or experience (practical, volunteer, paid) in any of the following categories. NOTE: None is required to be a panel member

- | | | |
|--|--|---|
| <input type="checkbox"/> Child Care | <input type="checkbox"/> Mental Health | <input type="checkbox"/> News Media |
| <input type="checkbox"/> Child Development | <input type="checkbox"/> Counseling/Psychology | <input type="checkbox"/> Writing/Editing |
| <input type="checkbox"/> Child Welfare | <input type="checkbox"/> Medicine | <input type="checkbox"/> Public Speaking |
| <input type="checkbox"/> Social Work | <input type="checkbox"/> Education | <input type="checkbox"/> Arts or Graphics |
| <input type="checkbox"/> Personnel | <input type="checkbox"/> Law | <input type="checkbox"/> Fund Raising |
| <input type="checkbox"/> Criminology | <input type="checkbox"/> Drug/Alcohol | <input type="checkbox"/> Advertising |
| <input type="checkbox"/> Law Enforcement | <input type="checkbox"/> Treatment Programs | <input type="checkbox"/> Public Relations |

If yes, please describe: _____

Please describe any other volunteer and community activities: _____

List Hobbies, Special Interest/Skills: _____

Have you ever been or are you currently a foster parent? _____ If yes, where? _____

List any arrests, other than traffic citations, and give the charge, date, county/state, and disposition: _____

When can you attend citizen panel reviews at the Juvenile Court? Please check time available:

3 rd Tuesday of each month	
Morning (9AM-Noon)	
Afternoon (1pm-4pm)	

You may be asked to stay later.

I, _____, hereby affirm that all of the answers provided on my volunteer application are true. I understand that the information requested will be used only for the purpose of determining my suitability as a Citizen Panel Member. I understand that this application does not ensure appointment to review panel. After the successful completion of my training, I further understand that I will be expected to serve a minimum of one year in the Citizen Panel Review Program, and that I may be reappointed if I wish to remain active for a longer period of time. If unforeseen circumstances prevent me from fulfilling this obligation, I will submit a written resignation to the program coordinator with as much advance notice as possible.

I am aware that I will be examining sensitive, confidential documents, reports, and other materials in my capacity as a Citizen Panel volunteer. I will discuss these matters only with those persons directly involved in the case at the Court or those who will be consulted for their professional knowledge and expertise.

Signature

Date

