VOLUNTEER APPLICATION

Thank you for your interest in becoming a Big Brother or Big Sister. Please submit completed application via email to info@bbbstri.org*,* fax to (919) 850-9774 or mail to address listed above.

\* A $25 application processing fee is due at the time of submission. You may pay by check (made out to BBBST) or through PayPal. The link may found on the get involved tab, being a big brother/being a big sister of our website.

All applications will be given equal consideration regardless of race, age, sex, disability, marital status, sexual orientation, gender identity, gender expression, veteran status, religion or national origin.

GENERAL INFORMATION

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Legal First Name: | Middle Name: | | | | | Last Name: | | | | | | Preferred/Nickname Name : | | |
| Home Phone #: | Work Phone #: | | | | | Cell Phone #: | | | | | | Is it okay to text you? Yes No  Cell phone Provider: | | |
| Home Address: | | | City: | | | | | | County: | | | State: | | Zip: |
| Personal E-mail: | Work E-mail: | | | | | | How do you prefer to be contacted?  (Phone, e-mail, time of day, etc.) | | | | | | | |
| Social Security Number: | | | | | | | Gender Id/Expression: | | | | | | Marital Status:  If applicable, maiden name: | |
| Date of Birth: | | | | | | | Preferred Pronouns: | | | | | |
| Race/Ethnicity:  American Indian or Alaska Native  Asian  Black or African American  Hispanic or Latino  Native Hawaiian or Pacific Islander  White | | | | Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Multi-race (check all that apply)  *American Indian or Alaska Native*  *Asian*  *Black or African American*  *Hispanic or Latino*  *Native Hawaiian or Pacific Islander*  *White*  *Other* | | | | | | | | | | |
| Nationality/Country of Origin: | | | | | | | | | | | | | | |
| Occupation: | | | | | How Long Employed? | | | | | | | | Work Hours? | |
| Employer/Company Name: | | | | | | | | | | | | | | |
| Highest Level of Education:  Area of Study: | | | | | | | | Are you a student at this time? Yes No  If yes, please name school: | | | | | | |
| Do you have current or past military experience? Yes No | | | | | | | | | | | Dates of Service: | | | |
| Branch:  Air Force  Army  Marine Corps  Navy  Coast Guard | | | | | | | | | | | | | | |
| Component:  Active  National Guard  Reserve | | | | | | | | Are you retired? Yes No  Are you separated/discharged (other than retired)?  Yes No | | | | | | |
| If retired, separated, or discharged, please check the character of separation/discharge:  Honorable  General (under honorable conditions)  Under Other than Honorable Conditions  Bad Conduct  Dishonorable | | | | | | | | | | | | | | |
| ***Possession of a driver’s license is required if you will be transporting a program youth in any vehicle you are operating.*** | | | | | | | | | | | | | | |
| Do you have a current and valid driver’s license? Yes No | | If yes, state of issue and #: Expiration date: | | | | | | | | Do you have a vehicle?Yes No Do you have valid insurance that meets or exceeds state required minimum?  Yes No | | | | |

Program Preference (check box): Community-based Program  Site-based Program

Have you previously applied to be or served as a Big Brother or Big Sister here or anywhere else? Yes No

If yes, when and where?

Have you ever been involved with Big Brothers Big Sisters in a capacity other than a Big? Yes No

If yes, when and where?

Have you ever been involved with or volunteered for another youth organization? Yes No

If yes, when and where?

Have you ever been denied acceptance or released from service as a volunteer or employee for another Big Brothers Big Sisters program or youth-serving organization? Yes No

If yes, when and where?

Are you interested in learning about additional ways to contribute to the Big Brothers Big Sisters mission?

Yes No

If yes, please check all interests that apply.

Becoming a donor

Helping to recruit volunteers

Volunteering at agency events for matches, Littles, waiting-list children, etc.

Volunteering at agency fundraising events

Inviting BBBS to speak at a company, church, organization, or other group of which I am a member

**REFERENCE INFORMATION**

Please list information for at least three references below including:

1. Your spouse or domestic partner (i.e., if you *live with* a significant other/ girlfriend/boyfriend) OR a family member, if you do not have a spouse, partner, or significant other);
2. Current or former employer or co-worker you have known for at least one year, or someone from your school if you are a student; AND
3. A friend or neighbor you have known for at least two years.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Spouse/Partner’s name:** | | Family member name (if no spouse/partner): | | | |
| Address: | | City: | | State: | Zip: |
| Day Phone #: | Cell #: | | Email: | | |
| **Employer or Co-worker** (current or past) or school personnel (if you are a student): | | | | | |
| Address: | | City: | | State: | Zip: |
| Day Phone #: | Cell #: | | Email: | | |
| **Friend, Neighbor, or other personal reference:** | | | | | |
| Address: | | City: | | State: | Zip: |
| Day Phone #: | Cell #: | | Email: | | |

*In addition to the references above, Big Brothers Big Sisters requires references from all youth serving organizations at which you have worked or volunteered in the past. Please list additional on separate page, if needed.*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Organization name: | | Direct supervisor: | | | | |
| Address: | | City: | | | State: | Zip: |
| Day Phone #: | Cell #: | | | Email: | | |
| Dates of involvement/employment:  Reason for leaving: | | | | | | |
| Organization name: | | | Direct supervisor: | | | |
| Address: | | City: | | | State: | Zip: |
| Day Phone #: | Cell #: | | | Email: | | |
| Dates of involvement/employment:  Reason for leaving? | | | | | | |
| Organization name: | | | Direct supervisor: | | | |
| Address: | | City: | | | State: | Zip: |
| Day Phone #: | Cell #: | | | Email: | | |
| Dates of involvement/employment:  Reason for leaving: | | | | | | |

I consent to and understand that:

1. The references and youth serving-organization I listed may be contacted by mail, telephone, email, or in-person;
2. The information I provided may be used to conduct a background check, to include a search of public domain records, driving records check, juvenile and adult criminal history check, military records, and other records where required by local, state, or federal law for volunteers working with youth;
3. I am in no way obligated to perform any volunteer services;
4. The BBBS agency is not obligated to match me with a youth and may deny my application or close my match at any time, and to protect all participants’ confidentiality, BBBS is not required to disclose reasons for doing so;
5. Other BBBS agencies and youth organizations where I have worked or volunteered may be contacted as references;
6. As part of the enrollment processes, I will be required to provide additional personal information, including completion of an in-person interview;
7. I understand that the information I provide in the enrollment process will be kept confidential, unless disclosure is required by law and with exceptions noted below.
8. I understand that incidents of child abuse or neglect, past or present, must be reported to proper authorities;
9. I understand that certain relevant information about me will be discussed with the parent/guardian of a child who is a prospective match (*this might include demographic information, information relevant to parent/child preferences, and any information relevant to a child’s safety or well-being*);
10. It is my responsibility to update the agency if any of the information I provide on this application, in my interview, or any other information provided during the enrollment process changes (*i.e. address, phone number, auto-insurance, new criminal charges, etc.*).
11. I agree to timely communication and follow-up with all agency staff.

***Please read the following carefully before signing this application:***

I understand that this is an application for a volunteer opportunity and is not a promise or commitment by Big Brothers Big Sisters.

I certify that all information I have provided or will provide to Big Brothers Big Sisters, including this application, is true, correct and complete to the best of my knowledge. I certify that I have and will answer all questions to the best of my ability and that I have not and will not withhold any information that would affect my application for a volunteer position. I understand that information contained on my application will be verified by Big Brothers Big Sisters. I understand that misrepresentations or omissions may be cause for my immediate rejection as an applicant or my termination as a volunteer.

At any time while involved with the Big Brothers Big Sisters program, I agree to immediately inform my Big Brothers Big Sisters contact person of any and all infractions, violations, charges and convictions related to any civil, domestic, or criminal occurrences. I understand that BBBS staff needs to be fully informed to provide the best guidance or support possible.

**Consent to Release Media Footage (please check one):**

\_\_\_ I hereby grant permission to recognized broadcast media and to Big Brothers Big Sisters to record footage of me. I understand this footage may be aired during upcoming newscasts and/or used for recruitment purposes for Big Brothers Big Sisters.

\_\_\_ I DO NOT grant permission to recognized broadcast media and to Big Brothers Big Sisters to record footage of me.

**Consent to Release Photographs and Video Footage (please check one):**

\_\_\_ I hereby grant permission to Big Brothers Big Sisters to use photographs of me. I understand photographs and footage may be used in printed materials (e.g. brochures, newspapers) and/or on Big Brothers Big Sisters websites, or otherwise used for recruitment purposes for Big Brothers Big Sisters.

**\_\_\_** I DO NOT grant permission to Big Brothers Big Sisters to use photographs of me.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_