



Date: \_\_\_\_\_

## COMMUNITY BASED VOLUNTEER APPLICATION

*Please fill out completely using blue or black ink. All information is confidential.*

First Name:		Middle Initial:	Last Name/Maiden Name:		Date of Birth:
Home Address:			City:	County:	State: Zip:
Email:		Home Ph #:	Work Ph #:	FAX:	
Male Female	Social Security #:		Employer/Occupation:		
Address:			City:	State:	Zip:
Previous Address if current address is less than 5yrs.				Ethnicity:	
May We Contact You At Work? Yes      No		Work Hours:		How Long Employed:	
Possession of a driver's license is not a requirement to participate in any of our programs but is required if you will be transporting a youth in any vehicle you are operating.					
Do you have a driver's license? Yes      No		If yes, state of issue and #		Expiration date:	

### REFERENCES

Please type or print information requested for three references: 1) your current or past employer who has known you for at **least 1 year**; 2) a co-worker or friend who has known you for at **least 2 years**; and 3) a close family member (spouse/domestic partner) or a second friend who has known you for at **least 3 years**.

1. Employer's Name (or school if student):		Supervisor's Name (or teacher if a student):			
Address:			City:	State:	Zip:
Day Phone #:		Fax #:		Email:	
2. Coworker or Friend:					
Address:			City:	State:	Zip:
Day Phone #:		Fax #:		Email:	
3. Spouse/Domestic Partner/Friend:					
Address:			City:	State:	Zip:
Day Phone #:		Fax #:		Email:	
Have you ever applied before (or have been) to be a Big Brother or Big Sister? Yes      No			If so, where and when:		
What, if any, other youth organizations have you worked for or been involved with as a volunteer?					

## VOLUNTEER POLICY & PROFILE

Big Brothers Big Sisters is a social service program designed to help children who have shown a need for a strong relationship with an interested adult. While the program is an interfaith and interracial one, the desires of the child's parent or guardian are respected in the selection of the appropriate adult for each child.

In determining whether an applicant may be considered for a match and what information shall be communicated to each party involved in any prospective match regarding the others, due consideration must be given to those past and present factors in the health, personality and behavior of each individual and/or family consultation, which professional agency personnel deem, under the circumstances, may have a significant effect upon the relationship, and which, if revealed at a later date, might affect it adversely. Relevant information shall be provided; however, the name or names of the parties described shall be held confidential before a match is made. Any party has the right to refuse to enter into the match based upon the information so communicated. Once the match is made, certain elements of the client's information should remain in confidence, except in instances required by law.

An assignment interview is designed to establish a profile for you and your interests. This profile will be used by the agency to best match you with a Little Brother/Little Sister. Except for parents and/or guardians with a direct responsibility for a Little Brother/Little Sister who has been pre-screened and is actively being considered for a match with you, all elements of your profile will be kept in the strictest confidence, except in instances required by law. Of course, prior to any assignment to a Little Brother/Little Sister a similar profile of him/her and the family will be discussed with you to insure that your desires will be respected.

The undersigned acknowledges and agrees that, (1) he/she is not obligated, if assigned, to perform the volunteer services herein applied for, that (2) **Big Brothers Big Sisters of the Central Piedmont is not obligated to assign, or actively seek to assign, him/her a Little Brother/Little Sister, and that**, (3) as a part of the Agency's screening process, additional personal information, such as employment history or police records, may be elicited by the Agency's professional staff.

This information given in this application is current and accurate to the best of my knowledge.

DATE: \_\_\_\_\_ SIGNED: \_\_\_\_\_

### AUTHORIZATION For Release of Personal Data Record Information

I hereby authorize and request any former employer, school, police department, financial institution, or other persons having personal knowledge about me, to furnish BBBS or any agency of its choice, with any and all information in their possession regarding me in connection with an application for employment. I understand that investigation background inquiries are to be made on myself including consumer, criminal, driving and other reports. These reports will include information as to my character, work habits, performance and experience along with reason for termination from previous employers. Further, I understand to furnish BBBS or any agency of its choice will be requesting information from various federal, state, and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil and other experiences as well as claims involving me in the files of insurance companies.

I am willing that a photocopy of this authorization be accepted with the same authority as the original. I understand this authorization is to be part of the written volunteer application which I sign.

**I do / I do not consent (circle one)** to the use of identifying information and video, film, and photographs in publications and promotional materials.

PRINT FULL NAME: \_\_\_\_\_  
APPLICANT'S SIGNATURE: \_\_\_\_\_  
DATE: \_\_\_\_\_

***Thank you for your time and interest in the Big Brothers Big Sisters program!***

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For BBBS Use Only  
BBBS Staff Receiving Application: \_\_\_\_\_

Updated: 3/7/2008  
Date Received: \_\_\_\_\_