

# LITTLE APPLICATION

**Mission:**

Provide children facing adversity with strong and enduring, professionally supported one-to-one relationships that change their lives for the better, forever.

**Programs Offered:**

Traditional Program: Big Brothers, Big Sisters, Big Couples (married), and Big Families. This program is designed to match children between 5 and 15 years old, with an adult who can serve as a positive role model, giving a child a chance to see their unlimited potential and providing the opportunity to develop into a more responsible, successful, well-rounded individual.

South Dakota Youth Hunting Adventures (SDYHA) is designed to instill in children a lifelong enthusiasm and respect for hunting, fishing, wildlife and habitat conservation, and landowner appreciation while providing a complete realistic hunting experience. Hunter safety is emphasized. Children must turn 12 before December 31st of that hunting year.

School Mentor Program is designed to help children reach their potential at school but isn't limited to the classroom. Littles talk with their Bigs about class, do homework or read together. It's about starting a friendship, providing guidance and inspiring children to succeed.

Adopt-A-Class is part of our School Mentor Program. BBBS has "adopted" first grade classrooms in the Rapid City School District. Each enrolled child in that classroom is matched with a Big. The match works on homework and reading and they build a friendship. The Little is inspired and they have help succeeding in school.

Mustang Round-Up is a staff supervised group mentoring program specifically for General Beadle students. It meets on Fridays at General Beadle and is led by high school student volunteer mentors.

Campus Kids is a staff supervised group mentoring program specifically for children waiting for a Big Brother or Big Sister. It meets once a week at the SD School of Mines & Technology campus and is led by college student volunteer mentors.

\* Required

## Parent/Guardian Information

1. **First Name \***

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2. **Last Name \***

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3. **Home Address \***

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4. **City \***

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**5. State \***

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**6. Zip Code \***

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**7. County**

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**8. Home Phone Number \***

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**9. Cell Phone Number**

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**10. May we text you?**

*Mark only one oval.*

Yes

No

**11. E-mail Address**

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**12. Do you have legal custody of the child? \***

*Mark only one oval.*

Yes

No

**13. Is there a person who shares legal custody of this child? \*If yes, please add their name and phone number below. \***

*Mark only one oval.*

Yes

No

**14. Name**

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**15. Phone Number**

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16. **If yes, are they aware and supportive of the child's enrollment in the BBBS program?**

*Mark only one oval.*

Yes

No

17. **Employer name**

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18. **Employer phone**

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19. **May we contact you at your place of employment if needed?**

*Mark only one oval.*

Yes

No

20. **Best time to contact you?**

*Mark only one oval.*

Morning

Afternoon

Evening

21. **Best way to contact you?**

*Mark only one oval.*

Home phone

Cell phone

Work phone

Email

Postal Address

## Child Information

22. **Check the program you are most interested in for your child. \***

*Check all that apply.*

Traditional

South Dakota Youth Hunting Adventures

School Mentor

Mustang Roundup (Must attend General Beadle Elementary)

23. **First Name \***

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24. Middle Name

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25. Last Name \*

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26. Preferred Name/Nickname

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27. Gender \*

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28. Date of Birth \*

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*Example: December 15, 2012*

29. Home Phone Number \*

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30. Cell Phone Number

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31. Can we text you?

*Mark only one oval.*

Yes

No

32. Home Address \*

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33. City \*

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34. State \*

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35. Zip Code \*

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36. County

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37. E-mail Address

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38. What school does the child attend? \*

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39. Grade \*

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40. Child's Race/Ethnicity \*

Check all that apply.

- American Indian or Alaska Native
- Native Hawaiian or Pacific Islander
- Asian
- White
- Black or African American
- Hispanic or Latino
- Multi-Race
- Other: \_\_\_\_\_

41. Child's Nationality/Country of Origin

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42. Emergency Contact (Please include name, address and phone number.)

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43. What is the child's living situation? \*

Mark only one oval.

- Two-parent household
- One-parent household/male
- One-parent household/female
- Other relative of child/non-parent
- Foster Home
- Group Home
- Other: \_\_\_\_\_

## Additional Questions

44. How did you hear about our program?

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45. What is the primary reason for you wanting your child to have a Big Brother or Big Sister?

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46. Does your child know that you are applying for the program? Does your child want to participate?

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47. Will your child be able to meet with their Big for about one hour a week for the next year?

*Mark only one oval.*

- Yes  
 No  
 Maybe

48. Does your child have siblings or relatives who are applying for the BBBS program at this time or who are currently in the program? If yes, please provide their name(s):

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49. Number of people (adults and children) in household: \*

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50. Please list anyone living in the home including their ages and relationship to the child:

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51. Is the parent/guardian receiving income assistance at this time? \*

*Mark only one oval.*

- Yes  
 No

52. **Is parent/guardian receiving assistance with housing (e.g. Section 8, residence in public-housing, etc)? \***

*Mark only one oval.*

- Yes  
 No

53. **If living in a housing development, please list the name:**

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54. **Is child eligible for free or reduced lunch? \***

*Mark only one oval.*

- Yes - Free  
 Yes - Reduced  
 No

55. **Household Annual Income: (total income of the adults the child lives with) \***

*Mark only one oval.*

- \$10,001-\$15,000  
 \$15,001-\$20,000  
 \$20,001-\$30,000  
 \$30,001-\$50,000  
 \$50,001+

56. **Does your child have a parent/caregiver with current or past military experience? If yes, please list dates of service: \***

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57. **If yes, please list branch:**

*Mark only one oval.*

- Air Force  
 Army  
 Marine Corps  
 Navy  
 Coast Guard

58. **If yes, please list component:**

*Mark only one oval.*

- Active  
 National Guard  
 Reserve

59. **Is the parent currently deployed? If yes, please list the date of deployment:**

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60. **Is the parent retired from the military?**

*Mark only one oval.*

- Yes
- No

61. **Is the parent separated/discharged (other than retired)?**

*Mark only one oval.*

- Yes
- No

62. **Does your child have a parent/caregiver that is currently incarcerated? \***

*Mark only one oval.*

- Yes
- No

63. **Have there been any drug or alcohol abuse issues in the child's family? \***

*Mark only one oval.*

- Yes
- No

64. **Has your child been physically abused? \***

*Mark only one oval.*

- Yes
- No

65. **If you answered yes, by who and when?**

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66. **If you answered yes, was it reported?**

*Mark only one oval.*

- Yes
- No



**67. Has your child been sexually abused? \***

*Mark only one oval.*

- Yes
- No

**68. If you answered yes, by who and when?**

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**69. If you answered yes, was it reported?**

*Mark only one oval.*

- Yes
- No

**70. Has your child ever been arrested or involved in the juvenile justice system? \***

*Mark only one oval.*

- Yes
- No

**71. If you answered yes, please explain.**

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**72. Within the last year, has your child been in any trouble at school?**

*Mark only one oval.*

- Yes
- No

**73. If you answered yes, please explain.**

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**74. Please describe your child.**


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**75. If your child is being raised in a single parent home, how did you become a single parent? \****Mark only one oval.*

- Divorce
- Death
- Separation
- Desertion
- Never Married

**CONSENT/UNDERSTANDING**

By entering my name below, I give permission:

1. For my child to participate in the Big Brothers Big Sisters Program
2. For the volunteer matched with my child, who has been screened and approved by Big Brothers Big Sisters, to transport my child to events and match activities
3. For the school to provide social and academic information about my child to Big Brothers Big Sisters (e.g. report cards, behavior reports)
4. To have my child participate in an in-take interview conducted by Big Brothers Big Sisters staff and complete questionnaires throughout his/her time in the program containing questions about school, home life, and personal interests
5. To have my child talk with a Big Brothers Big Sisters staff person about personal safety
6. For BBBS staff to provide contact information for me and my child to the volunteer

**76. Parent/Guardian Signature (Type your full name. This will act as your signature) \***


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**77. Date \****Example: December 15, 2012***Please read the following carefully before signing this application:**

I understand that the program is not obligated to match my child with a volunteer and that as part of the enrollment process I will be asked to provide additional information through an in-person interview. 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. I understand that incidents of child abuse or neglect, past or present, must be reported to proper authorities. I understand that certain relevant

information about my child will be discussed with the volunteer who is a prospective match (i.e. demographic information, information relevant to volunteer preferences, and information relevant to child-safety and well-being).

I certify that all of the information on this form is true and correct and that all income is reported. I understand this information is being given for the receipt of federal funds, that the information on this application may be verified, and that deliberate misrepresentation of the information may subject me to prosecution under applicable state and federal laws. I understand this information will not affect my qualification for the program.

I do hereby release the organization and its employees, agents, members, volunteers and all other persons on its behalf from any and all liability for any damage or injury which such child might sustain while participating in said program and activities, including but not limited to any liability to any right of action that may occur to such child directly, or to me as his/her guardian. I understand that this information may be shared with the school or with partnership agencies when applicable.

If my child is matched with a Big Brother or Big Sister I agree to support my child's match by reviewing the program and safety information given to me by Big Brothers Big Sisters, communicating with Big Brothers Big Sisters staff as outlined in expectations (which includes communication at least once a month in the first year of the match), and immediately reporting any concerns I might have to Big Brothers Big Sisters staff.

**78. Parent/Guardian Signature (Type your full name. This will act as your signature) \***

\_\_\_\_\_

**79. Date \***

\_\_\_\_\_  
*Example: December 15, 2012*

## Talent/Media Release

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I hereby consent to the use, sale, reproduction, transfer, or conveyance, of any and all photographs, images, likenesses, and voice recording of me in all forms (with or without the use of my name( by Big Brothers Big Sisters of the Black Hills, or by any designee of the Agency.

I hereby consent to the use of all forms of media including advertising, trade, display, editorial, art, exhibition, and Agency newsletters (with or without my photograph and / or my name). I hereby give this consent and release to Big Brothers Big Sisters of the Black Hills, their nominees and designees from liability for any violation of any personal or proprietary right and agree to hold Big Brothers Big Sisters of the Black Hills harmless from all liability from the use, sale, reproduction, transfer or conveyance of the aforementioned items.

**80. Please Check One: \***

*Mark only one oval.*

I have read this document, understand it is a release of all claims, and consent to the above.

I do not consent to the above.

**81. Signature (Type your full name. This will act as your signature) \***

\_\_\_\_\_

**82. Date \***

\_\_\_\_\_  
*Example: December 15, 2012*

**83. Print Parent/Guardian Full Name \***

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**84. Print Child's Full Name \***

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