

425 Kansas City St. Rapid City, SD 57701 Office 605.343.1488 Fax 605.343.5679 www.bigmentors.com









# **Volunteer Application**

## MISSION

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

## MENTORING OPPORTUNITIES

## **COMMUINITY-BASED PROGRAMS:**

- Big Brothers, Big Sisters, Big Couples (married), and Big Families: These programs are 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.
- Outdoor Adventure Program 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.

### SITE-BASED FACILITATED PROGRAM:

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 on the SD School of Mines & Technology campus and is led by college student volunteer mentors.



## **VOLUNTEER REQUIREMENTS**

#### Volunteer Mentors must:

- be at least 16 years of age for Site-Based Facilitated mentoring, 18 years of age for Community Mentoring, 21 years of age for Outdoor Adventure Mentoring
- be able to serve as a positive role model for a child or new mother
- inform BBBS agency of any misdemeanor or felony charge, arrest, conviction, pardon or any suspended imposition of sentence incurred during the intake process and/or the match including violations with Game Fish and Parks
- be willing to spend one hour each week with a child in a Community Based Program or Campus Kids
- be willing to commit to at least 1 year in the agency's Community Based Programs or 1 semester in Campus Kids
- be free of drug and alcohol abuse or treatment for 3 years
- have a valid driver's license, access to an insured vehicle, and proof of insurance

#### The Volunteer Mentor enrollment process consists of:

- an office interview
- a home interview (for community-based programs)
- providing personal references
- consenting to a police background check (for those 18 years old and older)
- completing all necessary volunteer training



#### **VOLUNTEER APPLICATION**

Thank you for your interest in becoming a Big Brother, Big Sister, Big Family or Big Couple. Please submit completed application via email to **officead@bigmentors.com** or fax to **605-343-5679** or hand deliver or mail to **425** Kansas City Street, Rapid City, SD 57701.

Along with this application, you will need to submit a copy of a government-issued photo ID, as well as your driver's license (if not used as your government-issued photo ID), and proof of auto-insurance, if you plan to transport a child within the community-based program. All applications will be given equal consideration regardless of race, age, sex, disability, marital status, sexual orientation, religion or national origin.

complete an application)						
Big Brother		_ Big	Sister Big	Couple [	Big Fami	ıly
	Outdoor Adventure Campus Kids					
GENERAL INFORMATION						
First Name:	Middle Name:		Last Name:		Preferred Name :	
Home Phone #:	Work Phone #:		Cell Phone #:		Is it okay to text you?	
Home Address:		City:			State:	Zip:
		How do you prefer to be contacted? (Phone, e-mail, time of day, etc.)				
Social Security Number:		Gender:			Marital Status:	
Date of Birth:			7		If applica	able, maiden name:
		☐ Otł	ner  lti-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			
_		How L Emplo	-	Work Hours?  Can you receive calls at work?		at work?



Highest Level of Education:		Are you a student at this time?  Yes No				
Area of Study:		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 Gu	aard 🗌 Reserve	Are you 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 licens operating.	se is required if you will be	e transporting	g a program youth in any vehicle you are			
Do you have a current and valid driver's license?  Yes No	If yes, state of issue and		ı have a vehicle? s			
	Expiration date:	exceed	u have valid insurance that meets or ds state required minimum? s			
How did you hear about our 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? <b>Yes</b> 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? <b>Yes No</b> If yes, when and where?						



Are you interested in learning a  Yes No	about addition	al ways to contrik	oute to the B	ig Brothers B	ig Sisters mission?	
If yes, please check all intered Becoming a donor  Volunteering at agency f  Inviting BBBS to speak a	☐ Voluntee undraising eve	ring at agency events	elping to re	cruit voluntee		
REFERENCE INFORMATION						
<ul> <li>Your spouse or domestic member, if you do not he</li> <li>Current or former empleschool if you are a stude</li> <li>A friend or neighbor you</li> </ul>	c partner (i.e., i ave a spouse, p oyer or co-wor nt	f you live with a s artner, or signific ker you have kno	ant other) wn for at lea	_	d/boyfriend) OR a family r someone from your	
Spouse/Partner's name:		Family member name (if no spouse/partner):				
Address:			City:		Zip:	
Day Phone #:	Cell #:		Email:			
Employer or Co-worker (curre	nt or past) or s	chool personnel (	if you are a	student):		
Address:		City:		State:	Zip:	
Day Phone #:	Cell #:	Email:				
Friend, Neighbor, or other per	sonal reference	<b>):</b>				
Address:		City:		State:	Zip:	
Day Phone #:	Cell #:		Email:			
Friend, Neighbor, or other per	sonal reference	):				
Address:	City:			State:	Zip:	
Day Phone #:	Cell #:		Email:			



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

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



#### **CONSENT / UNDERSTANDING**

- 1) The references and youth serving-organizations I listed may be contacted by mail, telephone, email, or inperson
- 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, home interview, and the necessary training
- 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.)

Signature	Date	<del></del>	
If applicant is under the age of 18, co-	-signature of a parent/guardian is requ	ired	
Parent/Guardian Name	Signature	Date	

11) I agree to timely communication and follow-up with all agency staff



Date\_\_\_\_

#### 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. Signature \_\_\_\_ If applicant is under the age of 18, co-signature of a parent/quardian is required for application and to obtain criminal history record check information: Parent/Guardian Name \_\_\_\_\_\_ Date \_\_\_\_\_ Date \_\_\_\_\_ TALENT / MEDIA RELEASE 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. Please check one: \_\_\_\_ I have read this document, understand it is a release of all claims, and <u>consent</u> to the above. I **do not consent** to the above. Signature \_\_\_\_\_ If applicant is under the age of 18, co-signature of a parent/guardian is required Parent/Guardian Name \_\_\_\_\_\_Signature \_\_\_\_\_



#### **VOLUNTEER PRE-INTERVEW QUESTIONNAIRE**

Prior to your in-person interview, please answer the questions below. Parents of youth in our programs will often ask questions about someone with whom their child will be matched. The information you provide will also help us make a better match for you and assure we can support you during your involvement with our program.

Please note that you will have an opportunity to discuss these questions and your responses more thoroughly during your in-person interview.

Do you have any concerns about your ability to fulfill the 12-month commitment required of mentors Yes No	?				
Do you anticipate any significant life changes over the next year or had any this past year?  [Yes ]No					
Please describe:					
Have you ever been accused, arrested, charged, or convicted of a crime?  Yes No					
Have you had any driving citations and/or moving violations in the past 5 years?  Yes No					
Do you have guns, ammunition, or other weapons in your house?  Yes No					
5. Are you experiencing any physical or mental health issues?  —Yes —No					
Do you speak any foreign languages?  Yes No					
Is there anything else you'd like to tell us about yourself or any questions that you have?					
Are there other people living in your household? Provide name, age, relationship to you.					
Name: Age: Relationship:					
Name: Age: Relationship:					
Name: Age: Relationship:					
Name: Age: Relationship:					
	□Yes No   Do you anticipate any significant life changes over the next year or had any this past year?   □Yes □No    Please describe:  Have you ever been accused, arrested, charged, or convicted of a crime?  □Yes □No   Have you had any driving citations and/or moving violations in the past 5 years?  □Yes □No   Do you have guns, ammunition, or other weapons in your house?  □Yes □No   Are you experiencing any physical or mental health issues?  □Yes □No   Do you speak any foreign languages?  □Yes □No   Is there anything else you'd like to tell us about yourself or any questions that you have?   Are there other people living in your household? Provide name, age, relationship to you.   Name: Age: Relationship:   Name: Age: Relationship:   Name: Age: Relationship:				

10. Please list any counties and states that you have lived in aside from your current address in the past 5 years.

I have answered these questions honestly and completely to the best of my knowledge.



O' .	F .
Signature	Date