



BIG BROTHERS BIG SISTERS of the Black Hills
 425 Kansas City Street
 Rapid City, SD 57701
 TEL: 605.343.1488
 FAX: 605.343.5679
 WEB: www.bigmentors.com

Office Use Only: MSS

General Information Please print (in ink) or type. All information is confidential.

Name _____ Address _____
 City, State, Zip _____ Email _____
 Social Security # _____ Home Phone _____ Work Phone _____
 Cell Phone _____ Employer _____ Work Schedule _____
 Can you receive calls at work? _____ Race _____ Do you have a driver's license _____ State & # _____
 Birth Date _____ Marital Status _____ Highest Level of Education _____

How did you hear about our program? _____

Have you applied with Big Brothers Big Sisters before? _____ If yes, when & where? _____

Have you worked/volunteered with youth in the past year? _____ If yes, please list supervisor as a reference below.

Circle the program for which you are volunteering (Big Couple or Big Family-each person must complete an application)

Big Brother Big Sister Big Couple Big Family Outdoor Adventure Mentor Mother Mentor School Mentor

References

You have my permission to contact the following four people for reference checks. _____ (Initial Here)

- References must have known you for at least one year (an exception may be made with teachers/supervisors).
- One reference is required to be a supervisor or teacher (past or present).
- Please include a **complete mailing address** for each reference.
- No relatives please.

#1

Name of supervisor/teacher →	
Street Address, City, State, Zip	
Area Code and Phone Number	
Relationship	

#2

Name of reference →	
Street Address, City, State, Zip	
Area Code and Phone Number	
Relationship	

#3

Name of reference →	
Street Address, City, State, Zip	
Area Code and Phone Number	
Relationship	

#4

Name of reference →	
Street Address, City, State, Zip	
Area Code and Phone Number	
Relationship	

VOLUNTEER MEDIA RELEASE

I hereby consent to the use, sale, reproduction, transfer, or conveyance, of any and all photographs, images, likenesses, and voice recordings 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 CONSENT to the above.

_____ I DO NOT CONSENT to the above.

Date _____

Printed Name

Signature of Applicant: _____ **Date:** _____

Signature of Parent/Guardian: _____ **Date:** _____
(if applicant is under 18 years of age)

Statement of Understanding

If I am accepted as a mentor in any of the Big Brothers Big Sisters of the Black Hills' programs, I understand my obligation to meet with my mentee regularly and to inform the Big Brothers Big Sisters agency staff as to the status of my match relationship. I further agree to accept the supervision of the agency staff and discontinue my service if I am requested to do so by the agency. I understand that all information that I have given may be substantiated by the Big Brothers Big Sisters agency and that all information is held in the strictest of confidence. I understand that any false information given by me may be grounds for termination of my match and/or ineligibility for the program and that completion of this application does not guarantee my placement into the program. I understand that Big Brothers Big Sisters of the Black Hills retains the sole and exclusive authority to induct people into the program in their sole discretion and as they see fit.

Signature of Applicant: _____ **Date:** _____

Signature of Parent/Guardian: _____ **Date:** _____
(if applicant is under 18 years of age)