

BIG BROTHER/ BIG SISTER/ MENTOR APPLICATION

*Questions with a * are not relevant to In-School Mentor/Group Program Volunteers!*

Please consider this my formal application to volunteer in the following program:

<input type="checkbox"/> Big Brother	<input type="checkbox"/> Big Sister	<input type="checkbox"/> Big Couple	<input type="checkbox"/> In-school Mentor	<input type="checkbox"/> Group programs	<input type="checkbox"/> Teen In-school Mentor	<input type="checkbox"/> Not Sure
---	--	--	--	--	--	--------------------------------------

Full Name: _____ Date of Birth: (Month/Day/Year)_____

Address: _____ City/Town: _____

Postal Code: _____ Primary Phone: _____

Secondary Phone: _____ Email: _____

Employer: _____ Occupation: _____

How long at present employment? _____ Work hours: _____

Emergency Contact: _____ Phone: _____

What prompted you to apply to volunteer with the agency? (Check all that apply)

TV RADIO NEWSPAPER FRIEND/FAMILY EVENT WEBSITE SOCIAL MEDIA

FLYER OR POSTER SOMEONE INVOLVED (Little, Big, Staff) I'VE ALWAYS KNOWN

FORMER BIG OR LITTLE OTHER: _____

Have you ever been, or applied to be, a volunteer with a Big Brothers Big Sisters agency in the past?

Yes No

If yes, where and when? _____

*Do you have a Motor Vehicle Available? Yes No

If no, describe alternate plans for transportation:

*Do you have at least \$1 million in auto insurance coverage? Yes No

*Have you been charged with any traffic violations or had your license suspended? Yes No

*Please list all people living in the home – related and non-related:

*Do you have pets? Yes No If yes, what type/size?

Why do you want to become a volunteer in the program now?

Are you anticipating changes in your life over the next year? (Job, moving, marital status, children) If yes, please describe:

Describe any training, education, paid or unpaid work or personal experience that would assist you in your position as a mentor, i.e., any experience you have with children between the ages of 6 and 15 years of age:

Are you a member of any clubs, affiliations or organizations?

What are your interests, hobbies or activities?

Are you interested in volunteering in other areas of the agency? If so, where?

Have you been arrested, charged, convicted or pardoned of a criminal offence? Yes No

Have you ever been accused, arrested, convicted or pardoned of a sexual offense involving a child or children? Yes No

REFERENCES

The Agency requires the names of THREE references for every volunteer candidate. The agency will be contacting each person regarding your application. Complete the following information **fully and legibly**. PLEASE SUPPLY PHONE AND E-MAIL ADDRESSES FOR FASTER RESPONSE. Be sure to let your Reference people know we will be contacting them.

Personal Reference (*must have known the applicant for at least two years*)

Name: _____ Email _____

Primary Phone _____ Secondary Phone _____

How long have you known this person? _____ In what capacity? _____

Vulnerable sector Reference¹ (*if no volunteer or paid experience exists in the vulnerable sector within the last five years, an employment reference or educational official reference is required*)

Name: _____ Email _____

Primary Phone _____ Secondary Phone _____

How long have you known this person? _____ In what capacity? _____

Significant Other (*Partner, married or otherwise - if no significant other exists, a family reference is required*)

Name: _____ Email _____

Primary Phone _____ Secondary Phone _____

How long have you known this person? _____ In what capacity? _____

Teacher Reference (*only required if applying for Teen Mentoring program*)

Name: _____ Email _____

Primary Phone _____ Secondary Phone _____

How long have you known this person? _____ In what capacity? _____

This information is true to the best of my knowledge.

Signature of Applicant

**Signature of Parent/Guardian
(If applicant is under 18)**

Date

¹ Please provide a reference(s) if you have worked with or volunteered with a person or organization responsible for the well-being of children under the age of 18 or with vulnerable persons who, because of their age, a disability, or other circumstances are at greater risk than the general population of being harmed by a person in a position of authority or trust relative to them.

VOLUNTEER PERMISSION AND RELEASE AGREEMENT

TO: BIG BROTHERS BIG SISTERS OF SAINT JOHN (THE "AGENCY")

The Agency and Big Brothers Big Sisters Canada ("**BBBSC**") are separate entities and this Agreement is between me and the Agency.

1. By applying to volunteer with the Agency ("Volunteer Application") and signing this Agreement, I acknowledge, understand and accept that:
 - (a) I am a legal resident of Canada and have reached the age of majority in the province or territory in which I reside. I acknowledge and agree that if I have not reached the age of majority of the province or territory in which I reside, my parent or legal guardian will also need to sign this Agreement in order for my Volunteer Application to be considered;
 - (b) There is no obligation on the Agency to accept my Volunteer Application or assign me as a volunteer into a mentoring program (a "**Mentoring Program**") and the Agency may terminate my involvement in a Mentoring Program in its sole discretion and without reason;
 - (c) If I am accepted as a volunteer, my involvement in a Mentoring Program is not intended to create and shall not be construed as creating either an employee–employer relationship or a contract for services that would allow me to receive a salary, compensation, payment or any benefits, monetary or otherwise; and
 - (d) If I am accepted into a Mentoring Program, I understand that I will be required to enter into a confidentiality agreement with the Agency, and I agree to abide by the volunteer position description(s) and code(s) of conduct established by the Agency, including any applicable guidelines, Standards and policies.

2. **Assumption of Risk, Release and Reimbursement:**

I acknowledge, understand and accept that:

 - (a) I am responsible for all risks associated with my involvement in a Mentoring Program including, without limitation, the risk of bodily or psychological harm or injury.
 - (b) Subject to local laws, I agree not to sue the Agency, BBBSC and/or any of their member agencies in respect of any such injury or claim resulting from my participation in a Mentoring Program, my Volunteer Application, the acceptance or denial of my Volunteer Application, the Alumni Program and/or my association with the Agency or BBBSC.
 - (c) I understand that I am fully responsible for any damage to my personal vehicle and/or property during my volunteer involvement in a Mentoring Program and that neither BBBSC nor the Agency insures personal vehicles or property belonging to its volunteers;
 - (d) I agree to reimburse the Agency and/or BBBSC and/or any of their member agencies for any damages or losses of any kind (including but not limited to the injury of any other person and/or damage to or loss of property) that may arise in connection with my gross negligence, wilful misconduct, or failure to act in accordance with published BBSC policies and guidelines and relating to or arising in connection with my participation in a Mentoring Program or my association with the Agency or BBBSC, including payment of any and all legal expenses of the Agency, BBBSC and/or any of their member agencies.

3. **Background Check.** I understand that my acceptance into the Mentoring Program will be conditional on my successful completion of a background check, which may include contacting the references included in my Volunteer Application and/or a criminal record check, for the purposes of confirming my suitability for the Mentoring Program. I agree to provide all necessary consents for such background checks.

4. **Privacy Notice.** The personal information provided by me or otherwise collected by the Agency in connection with my application will be used by the Agency for the purpose of evaluating and considering my Volunteer Application and, if accepted into a Mentoring Program, for the purpose of administering the Mentoring Program. This information may include my name, phone number, mailing address, date of birth, results of background check, and driver's license and auto insurance information. My personal information will be maintained by the Agency on a confidential basis and will only be disclosed to the parent(s) and/or guardian(s) of a child with whom the Agency may consider "matching" me in a Mentoring Program, to representatives of a school or institution in connection with my participation in a site-based Mentoring Program, to the BBBSC as required for the purposes of accreditation reviews or legal proceedings and as otherwise required or permitted by law. In the event the Agency ceases operations, any and all information about me held by the Agency will be provided to BBBSC, another BBBSC agency selected by BBBSC, or both and will be used for the purposes set out above.

In the event where it is deemed necessary, any and all information about me held by the agency will be provided to BBBSC, another BBBSC agency selected by BBBSC, or both and will be used for the purposes set out above. No information will be provided to persons or organizations outside of Big Brothers Big Sisters of Canada, and its agencies, about parents, children or volunteers without their express prior written consent except where required by law.

5. **Other Terms of this Agreement.**

- (a) In entering into this Agreement, I am not relying on any oral or written representations other than as set forth in this Agreement.
- (b) This Agreement shall be governed by and construed pursuant to the laws of the Province or Territory in which the Agency is located.
- (c) In the event that any provision or term of this Agreement is held to be invalid, illegal or unenforceable, the remaining provisions of this Agreement shall remain in full force and effect.

6. **Media Consent.** Any photographs or video productions taken of volunteers by agency staff at recreational events or match outings, or otherwise authorized by the Executive Director or Board of Directors, may be used by the agency for purposes of promotional material including brochures posters, newsletters, media information, advertisements, audio-visual productions and web pages, such as the Agency website and social media. Photographs or video productions may also be shared with community and school partners and Big Brothers Big Sisters of Canada for program promotion.

If you do not agree with item #6 *Media Consent*, please check here:

IMPORTANT: I acknowledge that I have read the terms of this Agreement, have been given an opportunity to obtain independent legal advice, and understand that it represents a waiver of certain of my legal rights, including my right to sue (subject to local laws). I further agree that such limits are reasonable and sign this Agreement freely, voluntarily and without duress.

_____ Signature of Applicant	_____ Signature of Parent or Legal Guardian (if required)
_____ Applicant Printed Name	_____ Parent or Legal Guardian Printed Name (if required)
_____ Date	_____ Date