

APPLICATION FORM
Program Volunteer

Date of Application: _____ Date Application Rec'd: _____

Once you have had an opportunity to review the volunteer options available with Big Brothers Big Sisters of Prince George, **please complete this application form.**

Subsequent to the completion of the application forms, please schedule an interview with one of our service delivery staff.

Prior to your initial interview it is important that you begin the Criminal Record Check process. Please take the forms provided to you, to the downtown RCMP detachment for completion. Administrative staff at the detachment will walk you through the completion of the forms. You will be required to show valid ID and to sign the forms in person.

Please consider this my formal application to volunteer with Big Brothers Big Sisters of Prince George in the following capacity:

- Traditional Big Brother/Big Sister
- Couples Match Volunteer
- In-School Mentor (International Students may apply)
- YES Group Program Volunteer (International Students may apply)
- Board or Committee Member
- Special Events Volunteer (ie. Fundraising etc.)

Full Name: _____ Birth Date: _____

Address: _____

Postal Code: _____ Home Phone: _____

Length of time at this address: _____ How long have you lived in the area: _____

Work Phone: _____ Can we call you at work: Yes No

If yes, what hours do you work: _____

E-mail Address: _____

Emergency Contact: _____ Phone Number: _____

Do you own or have access to a vehicle? Yes No

Does it have passenger side air bags? Yes No

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

Drivers License number: _____

Copy of license Provided: (not required for In-School Mentors)

Yes No Date: _____



BIG BROTHERS BIG SISTERS OF PRINCE GEORGE

The minimum age requirement to volunteer in the **Traditional/Couples** Program is 19 years of age. Do you meet this requirement?

- Yes No Not applicable

The minimum age requirement to volunteer for **Group Programs** is 19 years of age. Do you meet this requirement?

- Yes No Not applicable

The minimum age requirement to volunteer in the **In- School Mentoring** Program is 19 years of age. Do you meet this age requirement?

- Yes No Not applicable

To qualify for the **Couples Program** you have been in your current relationship for at least one year. Do you meet this requirement?

- Yes No Not applicable

How did you hear about this program?

- | | | |
|---|---|--|
| <input type="checkbox"/> TV | <input type="checkbox"/> Radio | <input type="checkbox"/> Website |
| <input type="checkbox"/> Current Volunteer | <input type="checkbox"/> Special Event | <input type="checkbox"/> Newspaper |
| <input type="checkbox"/> Bill Board/Bus Shelter | <input type="checkbox"/> I am a former Big | <input type="checkbox"/> Friend/Relative |
| <input type="checkbox"/> I've always known | <input type="checkbox"/> I am a former Little | <input type="checkbox"/> Brochure |
| <input type="checkbox"/> Other: _____ | | |

Have you ever been, or applied to be, a volunteer with a Big Brother/Big Sister agency in the past?

- Yes - If yes where and when? No

Please explain why you want to become a volunteer in the program now?

Please tell us a little about your current family/living situation:

Please accept this as my formal application to become a program volunteer with Big Brothers Big Sisters of Prince George.

Signature

Date

* **Please continue with page three** if you are considering the Y.E.S. or In-School Mentoring Programs.



BIG BROTHERS BIG SISTERS OF PRINCE GEORGE

RCMP Criminal Record Checks

If you are making an application that includes the **Youth-In-Care (Y.E.S.) Group Program** or the **In-School Mentoring Program** please complete the appropriate consent to release RCMP Records Check information below. As part of our partnership agreements, we are required to share this information with The Ministry of Children and Family Development office and/or School District 57. This information is shared with these agencies in strict confidence.

Y.E.S. (Youth-in-Care) Group Volunteer – Consent to Release RCMP Criminal Record Check

I, _____ (volunteer name), hereby give my consent for Big Brothers Big Sisters of Prince George to share the results of the RCMP Criminal Record Check, with the Ministry of Children and Family Development.

Signature

Date

In-School Mentoring Program – Consent to Release RCMP Criminal Records Check

I, _____ (volunteer name), hereby give my consent for Big Brothers Big Sisters of Prince George to share the results of the RCMP Criminal Record Check, with School District # 57.

Signature

Date



CONFIDENTIALITY POLICY

PROGRAM VOLUNTEER

All staff and volunteers of Big Brothers Big Sisters of Prince George are required to abide by this Confidentiality Policy. Any breach of this policy will be considered grounds for termination.

Agency staff will explain the confidential nature of our service to the volunteer, child and parent/guardian as early as possible in the orientation and/or screening process. At all times thereafter, staff members will ensure the privacy of case information.

Information contained in case files will not be disclosed by the Agency to any person without written approval of said person except in the following cases:

- where the safety of a child depends upon divulging this information. This could include suspicion of neglect or abuse of a child. The proper authorities will be informed when necessary, which could result in the disclosure of confidential information without written consent from the person;
- when subpoenaed by the courts;
- where required by law.

In the event that confidential information is requested to support a custody or access application, or for any court matter other than a "child protection" case, the agency will only release the information if required to do so by a Judge's Order. Documents will only be released by the Executive Director, or those otherwise authorized (except where authorization for release is received, a legal search warrant is presented, or where required by Big Brothers Big Sisters of Canada and/or its agents).

No staff member or volunteer shall use confidential information from the agency to advance any personal interest, financial or otherwise.

In accordance with Big Brothers Big Sisters of Canada's National Standards:

- no information will be provided to persons or organizations outside of Big Brothers Big Sisters of Canada, and its agents, about parents, children or volunteers without their express prior written consent except where required by law;
- all information and records, including electronic records, shall be kept secure (for example, in a filing cabinet, desk, etc. under lock and key, password protected, etc.) and confidential at all times.

Case records and files will be accessible only to Mentoring Coordinator Staff, and Executive Director.

I have read and understand the Agency's policy around confidentiality and agree to abide by those rules.

Signature of Applicant

Date

Signature of Witness

Date



CODE OF CONDUCT

PROGRAM VOLUNTEER

Big Brothers Big Sisters provides quality mentoring relationships between adult volunteers and children who need a friend. A relationship with a mentor can improve the life of a child, and contribute to their emotional well-being. In the interest of the children and youth that we serve, volunteers commit to improving the life of a child by observing the following code of conduct:

- Volunteers agree to conduct themselves in a manner consistent with their position as a positive role model to a child, and as a representative of the Agency.
- Volunteers will follow the Agency policy and guidelines around the safety of the child as outlined in the Agency's Child Safety Training Program and not engage in any behaviour that may be perceived as being sexual and/or abusive with the child or any member of the child's family.
- Volunteers agree to respect the privacy and dignity of their Little and family by not divulging confidential information without consent, except where required by law as in the case of suspected child abuse.
- Volunteers agree to limit their involvement in a child's life to what is deemed appropriate by the Agency. Volunteers are seen as an influence, not a dominant factor, in the child's life.
- The adult-child relationship is based on mutual respect. Volunteers agree to treat the child in a respectful way at all times.
- Volunteers agree to allow their Little to develop their friendship at their own pace.
- Volunteers are required to discuss problems, issues, concerns, or changes of circumstances (living situation, change of address, telephone number, etc.) with the Agency contact person.
- In the event of match closure, Volunteers must be sensitive to the impact that this can have on the child, and take the necessary steps to minimize upset to the child. All matches are to be formally closed by service delivery staff.

I have read and understand the Program Volunteer Code of Conduct and agree to abide by those rules.

Signature of Volunteer

Date

Signature of Agency

Date



VOLUNTEER PERMISSION AND RELEASE FORM

PROGRAM VOLUNTEER

I acknowledge and accept that this application does not guarantee acceptance into the program, and that Big Brothers Big Sisters of Prince George is under no obligation to accept or assign me as a volunteer in their program, and is not obliged to provide a reason.

I understand and will abide by the job description and code of conduct related to my volunteer position. I agree to abide by the confidentiality guidelines of the Agency.

I hereby authorize Big Brothers Big Sisters of Prince George to contact any or all of the references listed herein for the purposes of processing my application to become a volunteer in the Agency's program. I understand that these references will be contacted in confidence.

I further authorize any individuals, firms, corporations, government or other regulatory departments, Police Departments or other organizations to release information and copies of documents pertaining to myself to Big Brothers Big Sisters of Prince George in order to consider my application to volunteer in the Agency's Program, on the understanding that such information will be held in strict confidence.

I give permission for Big Brothers Big Sisters of Prince George to release pertinent information regarding my file to the parent of the child in the process of match selection. Further, I agree to allow my file to be viewed by Agency Reviewers for Big Brothers Big Sisters of Canada, at the time of the agency review, should it be requested. I further grant Big Brothers Big Sisters of Prince George permission to release my name, date of birth, agency applied to, and notice of acceptance, rejection, or withdrawal to Big Brothers Big Sisters of Canada and for relevant details to be shared within the movement.

I understand this application and subsequent information in my file is the property of Big Brothers Big Sisters of Prince George. I understand that if Big Brothers Big Sisters of Prince George should cease operation, my complete file is the property of Big Brothers Big Sisters of Canada.

I hereby release and forever discharge Big Brothers Big Sisters of Prince George, and their employees, directors and volunteers from any cause of action or claim for damages, whether bodily injury, death, property damage, or emotional trauma, anxiety or distress arising from my association with Big Brothers Big Sisters of Prince George.

I have read and understand the implications of this waiver. I consent to them and further agree that this waiver is made of my own free will and without duress.

Name of Applicant

Date

Signature

Note: Release to share information with individuals outside of the BBBS movement will expire within one year of the above date.



MEDIA CONSENT

PROGRAM VOLUNTEER

From time to time some of Big Brothers Big Sisters program participants have the chance to take part in activities that raise the profile of Big Brothers Big Sisters within the community. The following gives consent for the named participant to be included in such publicity.

I, _____, hereby consent to be photographed, videotaped, interviewed for radio,
(name of Participant)

interviewed for television, interviewed for newspaper articles and for any other publication or medium, by a member of the media, photographer or by staff of Big Brothers Big Sisters of Prince George for the purpose of raising awareness and promoting Big Brothers Big Sisters of Prince George.

I understand that I, _____ may be seen by the general public and clearly
(Name of Participant)

identified as a participant in Big Brothers Big Sisters' programs and services.

I FURTHER ACKNOWLEDGE AND AGREE THAT I WILL NOT HOLD BIG BROTHERS BIG SISTERS PRINCE GEORGE, its employees, volunteers, agents, officers or directors responsible for any claim for injury to property, person or reputation which may arise from media coverage or publicity.

Signature

Date

Signature of Witness

Date



REFERENCES

PROGRAM VOLUNTEER

NOTE: All references must have known the applicant for a **minimum of 2 years**. Where an employment/volunteer reference does not meet this requirement, an additional character reference must be provided.

Character Reference (May NOT be a family member)

Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Home Phone: _____ Business Phone: _____ Ext: _____

E-mail Address: _____

How long have you known this person? _____

In what capacity do you know this person? _____

Character Reference (May NOT be a family member)

Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Home Phone: _____ Business Phone: _____ Ext: _____

E-mail Address: _____

How long have you known this person? _____

In what capacity do you know this person? _____

Employment/Volunteer Work Reference (May NOT be a family member)

Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Home Phone: _____ Business Phone: _____ Ext: _____

E-mail Address: _____

How long have you known this person? _____

In what capacity do you know this person? _____

Family Reference

Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Home Phone: _____ Business Phone: _____ Ext: _____

E-mail Address: _____

How long have you known this person? _____

In what capacity do you know this person? _____

Note: The agency reserves the right to ask for additional references. All references are guaranteed confidentiality, therefore their comments cannot be shared with the applicant, or if matched, the parent of the child.

Signature

Date

Print Name



MEMBERSHIP INVOICE

Dear Volunteers and Parents,

Big Brothers Big Sisters of Prince George encourages all of you to purchase your membership card. Your membership is valid for the calendar year from January 1st to December 31st. By purchasing your membership, this allows you voting privileges at our Annual General Meeting and helps Big Brothers Big Sisters continue to be eligible for gaming funds.

In order to apply for Direct Gaming and Bingo Funds, we are required to sell memberships. The following is an excerpt from a letter received from Direct Gaming.

“Per Part 3, Eligibility, of the Terms and Conditions, ensuring that the control and direction of an organization is in the hands of the volunteer membership is the GPEB’s criteria for community accountability of the expenditure of gaming funds for community benefit. The number of voting members is considered when determining eligibility and is reviewed with each application. Organizations that do not have a significant volunteer component may be denied access to gaming revenues. From review of your application, it was noted that the organization elects a 12 member Board, but has only 23 voting members. There should be a sufficient number of voting members to elect, or not, a board of directors. You are encouraged to increase your volunteer membership base and to have these individuals participate in the election of directors at your next Annual General Meeting.”

Thank-you for your contribution to our agency!

“Share a Little Magic”

Please complete the following (please print):

NAME _____
ADDRESS _____
CITY _____
PROVINCE _____ **POSTAL CODE** _____
TELEPHONE (RES) _____ **(BUS)** _____
MEMBERSHIP FEE PAID \$5 **CHEQUE** _____ **CASH** _____
SIGNATURE _____
DATE _____

Membership Card Issued Date: _____

Agency Signature: _____
New _____ **Renewal** _____

*** Your annual membership is due for renewal prior to Jan 1st of each year.



**BIG BROTHERS BIG SISTERS OF PRINCE GEORGE
APPLICATION FORM
SPECIAL EVENT VOLUNTEER**

Date: _____

First Name: _____ Last Name: _____

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Home Phone: _____ Work/Cell Number: _____

E-mail address: _____ Preferred Contact: E-Mail Phone

Are you over 19 years of age? YES NO

Are you currently in the screening process, or have completed the screening process to become a program volunteer with our agency? YES NO

If No:

Employer/Teacher/Professional/Volunteer Reference Information (known for at least **two** years)

Name: _____ Relationship: _____

Phone Number: _____ E-mail: _____

RCMP Criminal Record Search

All volunteers for our Agency are required to provide us with a RCMP Criminal Record Check. Please take the papers provided downtown to the RCMP Detachment for completion.. You will require photo ID to submit the records check. This will be completed for you at **no cost**. If you have need any assistance please contact our agency at 563-7410.

- ATV Raffle Bowl for Kids Sake Office Administration Program Activities
 Recruitment Booths Handyman Community Fundraisers (BBQ's etc.)

Comments: _____

I authorize Big Brothers Big Sisters of Prince George to use the above information within the agency. By signing below I commit to a minimum of 10 hours of Special Events volunteering through out the year.

Signature: _____ Date: _____

For BBBSPG use: (Please initial and pass on to Fundraising/Events Coordinator)

_____ Criminal Record Search returned _____ Photo Consent Date Accepted: _____

Entered into SEV Database on: / / by: _____