



## **Big Brothers and Big Sisters Of Dufferin and District**

P.O. Box 2 Orangeville Ontario L9W 2Z5  
Phone (519) 941-6431 Fax (519) 942-8731 E-mail [dufferinbigs@aol.com](mailto:dufferinbigs@aol.com)

Dear Big Brother or Big Sister Applicant:

Thank you for inquiring about becoming a Big Brother or Big Sister. As soon as we receive your application, we will contact you to set up an interview. Once the interview and Safety Training are complete and you are accepted into the Big Brother Big Sister program, you can begin to make a difference in the life of a child in our community!

Please send us your completed application by fax: **(519) 942-8731**  
Or by mail:

**Big Brothers Big Sisters of Dufferin and District**  
**P.O. Box 2**  
**Orangeville, Ontario**  
**L9W 2Z5**

If preferred, you can drop off your application at our office located in the basement of the Lord Dufferin Centre at **32 First Street, Orangeville.**

Within the application, we ask for three references. You can help speed up the process by letting your references know that a questionnaire will be mailed to them. Please ask them to return it to the above address as soon as possible.

We look forward to meeting with you. If you have any questions, please do not hesitate to contact a caseworker at our office by phoning: **519-941-6431** or by sending an email to: **[dufferinbigs@aol.com](mailto:dufferinbigs@aol.com)**.

Sincerely,

Darvey Liedtke  
Caseworker

Zillah Diamond  
Caseworker

Nancy Stallmach  
Executive Director

# Volunteer Application

---

- Traditional Big Brother/Big Sister
- Couples Matching
- In-School Mentoring
- Go Girls
- Other \_\_\_\_\_

Date: \_\_\_\_\_

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

How long at current address? \_\_\_\_\_

Previous address if less than one year: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Do you own or have access to a vehicle? \_\_\_\_\_

If yes, Driver's License Number: \_\_\_\_\_

Does your car have passenger-side airbags?  Yes  No

What is the level of your automobile insurance coverage? \_\_\_\_\_

## Employment

Employer: \_\_\_\_\_

Position: \_\_\_\_\_

Work Address: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Can we call at work?  Yes  No

Length of Time at present employment: \_\_\_\_\_

Working Hours: \_\_\_\_\_

## Family

Marital status:  single  separated  common-law  
 married  divorced  widowed

Partner's Name: \_\_\_\_\_

Partner's Place of Business: \_\_\_\_\_

Number of Children \_\_\_\_\_ Ages of girls \_\_\_\_\_ Ages of boys \_\_\_\_\_

What changes in your family status do you anticipate in the coming year? \_\_\_\_\_  
\_\_\_\_\_

How does your partner feel about you becoming a volunteer with Big Brothers & Big Sisters?  
\_\_\_\_\_

**Education**

Education Level:     High School     Trade School     College  
                           University             Other: \_\_\_\_\_

Name of last school attended: \_\_\_\_\_

Are you presently a student?     Yes  No    Where: \_\_\_\_\_

**Other**

Have you ever been in trouble with the Police?  Yes  No  
If yes, please explain and provide dates: \_\_\_\_\_

Have you ever been accused, arrested, convicted or pardoned of a sexual offense involving a child or children?     Yes             No  
If yes, please specify: \_\_\_\_\_

Have you ever been, or applied to be a volunteer with a Big Brother/Big Sister agency in the past? \_\_\_\_\_ If so, where and when? \_\_\_\_\_

Are you a member of any other clubs, affiliations or organizations? If so, please list them. \_\_\_\_\_

What are your interests, hobbies or activities? \_\_\_\_\_  
\_\_\_\_\_

How long have you been thinking about becoming a volunteer with this agency? (ie a week, a month, a year etc.)? \_\_\_\_\_

How did you hear about this program? \_\_\_\_\_

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

**Interest Sheet**

AGE: If you have a preference for a child in a particular age range, then please mark your preference: 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup>, or a 0 for an age you do not want to be matched with.

6-10 \_\_\_\_\_ 11-13 \_\_\_\_\_ 14-16 \_\_\_\_\_

**Child’s Personality and Home Situation**

Every child has a different personality and home situation, and some are more difficult to cope with than others. Mark which of the following you are willing to come with in a match:

Y – Yes            N- No            C- Might Consider

Parent has substance abuse problem		Untidiness		Child sees absent parent	
Child who has been sexually abused		Over Active		Short attention span	
No phone in child’s home		Body image issues		Attention seeker	
Child who has been physically abused		Poor hygiene		Dirty home	
School problems (behavior/academic)		Smoking		Family conflict	
Parent involved in a dating relationship		Lying		Shy	
Physical/developmental disabilities		Trouble with the law		Racial differences	
Unresponsive/non committal		Poor manners		Lacks self-esteem	
Not physically active		Learning disabilities		Non motivated	

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

---



**Confidentiality Policy**

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

Agency Service Delivery 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 Service Delivery Staff will ensure the privacy of case information.

Information contained in the Casework 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.

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 will be accessible only to the Caseworker, Executive Director, Casework Supervisor, and in appropriate situations, other Caseworkers.



I understand the agency’s policy around confidentiality and agree to abide by those rules.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## Volunteer Permission and Release Form

---

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

If I am matched, 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 Dufferin & District 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 hereby waive the right to request disclosure of the personal reference given about me.

I give permission for Big Brothers Big Sisters of Dufferin & District 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 Dufferin & District 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 pertinent facts related to my status 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 Dufferin & District. I understand that if Big Brothers Big Sisters of Dufferin & District should cease operation, my complete file becomes the property of Big Brothers Big Sisters of Canada. I understand that the information in my file will be retained by Big Brothers Big Sisters of Canada for a period ending 100 years after the close of my final match.

I hereby release and forever discharge Big Brothers Big Sisters of Dufferin & District, 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 Dufferin & District.

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

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

## VOLUNTEER CODE OF CONDUCT

Big Brothers and Big Sisters provides quality mentoring relationships with adult volunteers to children who need a friend. A relationship with a mentor can improve the life of a child, and contribute to his or her emotional well-being.

In the interest of the children and youth that we serve, Big Brothers and Big Sisters 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 Agency policy and guidelines around the safety of the child as outlined in the Agency's Child Safety Program and not engage in any behaviour that may be perceived as being sexual and/or abusive with the Child of any member of the Child's family.
- Volunteers agree to respect the privacy and dignity of their Little/Mentee 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 or Mentee to develop their friendship at their own pace. Volunteers agree that the focus of the relationship is the one-to-one match.
- Volunteers are required to discuss problems, issues, concerns, or changes of circumstances (living situation, change of address, phone number, etc.) with the Agency contact person. Volunteers agree to participate in regular support meetings to discuss the match relationship.
- 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 the agency caseworker.

---

Signature of Volunteer

---

Date

---

Signature of Caseworker

---

Date

**References**

**Character Reference:** \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Home Phone# \_\_\_\_\_ Business Phone# \_\_\_\_\_ x \_\_\_\_\_

Email: \_\_\_\_\_

How many years have you known this person? \_\_\_\_ In what capacity? \_\_\_\_\_

**Employment/Volunteer Work Reference:** \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Home Phone# \_\_\_\_\_ Business Phone# \_\_\_\_\_ x \_\_\_\_\_

Email: \_\_\_\_\_

How many years have you known this person? \_\_\_\_ In what capacity? \_\_\_\_\_

**Family Reference:** \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Home Phone# \_\_\_\_\_ Business Phone# \_\_\_\_\_ x \_\_\_\_\_

Email: \_\_\_\_\_

How many years have you known this person? \_\_\_\_ In what capacity? \_\_\_\_\_

I hereby waive the right to request disclosure of the personal reference information given about me by the individuals indicated above.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## Volunteer Contract

I am aware that the Big Brothers and Big Sisters Organization requires a minimum commitment of 12 months to see a Little Brother or Little Sister for approximately 2 to 4 hours on a weekly basis.

I understand that as a Big Brother or Sister, I am expected to act as a reasonable, responsible, prudent individual when my Little Brother or Sister is in my care.

I understand that any information I receive regarding my Little Brother or Sister will be held in strictest confidence.

\_\_\_\_\_  
Volunteer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date

# Release of Information (Physician)

Physician's Name:

---

Mailing Address:

---

---

---

---

Applicant's Name:

---

Mailing Address:

---

---

---

---

Applicant's Phone: \_\_\_\_\_

Applicant's Date of Birth: \_\_\_\_\_

I hereby authorize the above-named physician to release to Big Brothers Big Sisters of Dufferin and District any information required for my application in order to become an active member of this organization.

Dated at \_\_\_\_\_, this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Witness Signature

Place one of the following code letters after each item listed below. In some cases you may want to use more than one letter.  
**W** - sports I like to watch. **D** - things I like to do.  
**N** - things I don't like to do. **L** - things I have never done but would like to learn.

<b>SPORTS:</b>		<b>SCIENCE/MECHANICS:</b>		<b>OUTDOOR LIFE:</b>	
Boating		Auto Repair		Birds	
Diving		Aviation		Flowers & Plants	
Swimming		Chemistry		Gardening	
Skiing		Electronics		Insects	
Baseball		Engines (gas)		Snakes	
Boxing		Missiles/Rockets		Stars	
Soccer		Radio Building		Trees & Leaves	
Football					
Squash		<b>HANDICRAFTS:</b>		<b>OTHER THINGS:</b>	
Softball					
Wrestling		Ceramics		Card Games	
Badminton		Clay Modelling		Checkers	
Bowling		Drawing		Chess	
Golfing		Indian Bead Work		Cooking	
Mini Golf		Leather Crafts		Dancing	
Go-Karts		Model Airplanes		Dominoes	
Handball		Model Road Building		Photography	
Horseshoes		Model Cars		Reading	
Ping Pong		Painting Pictures		Sewing	
Target Practice		Sheet Metal Work		Singing	
Tennis		Tin Can Craft		Table Games	
Track Meets		Woodworking		Pinball	
Tumbling				Kites	
Weight Lifting		<b>COLLECTING:</b>		Video games	
Bicycle Riding				Computers	
Bows and Arrows		Autographs			
Horseback Riding		Coins			
Hockey		Music Records		<b>LIST ANY OTHER</b>	
Ice Skating		Photographs		<b>THINGS:</b>	
Roller Skating		Pictures			
Soap Box Derby		Rocks & Minerals			
Camping		Stamps			
Fishing		War Souvenirs			
Hiking					
Hunting					

Please go back and place an \* beside the five things you like the most.

What do you usually do in your spare time?