



Big Brothers Big Sisters
of Lethbridge and District

Volunteer Application Checklist

Note: Please make sure all information is clearly printed.

- Volunteer Application completely filled in, signed & dated.
- Volunteer Permission & Release, signed & dated.
- Confidentiality Policy & Statement Form, signed & dated.
- Media Consent Form, signed & dated.
- Volunteer Reference List with complete address, phone number, email address and fax number. This is also to be signed and dated.
- Child Welfare Record Check filled in as well as signed & dated.
- Police Record Check has been applied for. We will supply you with a letter to take to Lethbridge Regional Police to have this completed at no cost to you. The Police Service will then mail this directly to Big Brothers Big Sisters.
- With your completed application we require a copy of:
 1. Driver's License or Passport or Citizenship Number
AS Well As
 2. AHC card or Birth Certificate
- If applying for the Big Brother, Big Sister or Big Couple program, a statement from your insurance company showing you have one million dollars (\$1,000,000) liability coverage on your vehicle. Your insurance company can fax this to us at (403) 328-5960.
- Upon completion of the above, contact a caseworker to sign up for an orientation/child safety training session.

Thank you for your interest in Mentoring



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Application process for Community-Based Mentoring:

Pre-Match

Volunteers:

Initial Contact with BBBS Intake Caseworker
BBBS receives Application, References, Police Check, CWIS Check and Insurance Policy copy
Home Interview
(Couples Applications: The interview for couples is done separately. A joint interview is also completed)
Volunteer Orientation/Training
Caseworker completes an assessment and recommendation; file is passed to Executive Director for approval

Children:

Parent contacts BBBS
Program information and Application sent to parent
BBBS receives Application Form
References from Teacher and Professionals returned to BBBS
Parent and Child Safety Training (mandatory)
Parent and Child Interviews
Child placed on Waitlist

Matching Process

Volunteer chooses Mentee with Caseworker
Volunteer and Parent meet at BBBS
Initial Match Meeting with Volunteer, Child and Parent at BBBS Office
The Match Begins
Follow up as per National Standards

Application process for Site-Based Mentoring:

Pre-Match

Volunteers:

*same process as Community-Based program **except** the interview is held at BBBS

Children:

Student identified by a teacher
Teacher completes referral form
Teacher sends information package and consent form home with student
Referral form and parent consent returned to BBBS
Child placed on Waitlist

Matching Process

Mentoring Coordinator contacts volunteer and school with potential mentoring match
Volunteer receives orientation at the school and is introduced to student
The Match begins
Follow up as per National Standards



Big Brothers Big Sisters
of Lethbridge and District

Our Mission:

“Big Brothers Big Sisters of Lethbridge & District is a volunteer based agency serving the needs of children and youth by matching them with positive role models who will provide them an atmosphere of sharing, caring and trust”

PROGRAM INFORMATION FOR VOLUNTEERS

This information is designed to give you an overview of our mentoring programs and highlight the volunteer opportunities within the agency. The enclosed information will help you decide if this is the right volunteer experience for you. If you have any questions, please call us at 403.328.9355.

A Little Bit About Us:

At Big Brothers Big Sisters of Lethbridge our programs provide children in need with positive, caring, adult role models. Being a mentor may sound pretty formal but it is something anyone with a couple of hours a week and a desire to make a difference can do.

How our Programs Work:

Our professional staff matches each child in need of our services with a volunteer mentor. Both the volunteers and families go through a screening and interview process to make sure the program is right for them. Once they have been approved to participate in the program, our staff carefully matches a volunteer and child who will spend the upcoming year together. Volunteers and families receive training, guidance and support throughout the match. These steps help ensure the children and volunteers have a positive and rewarding experience in the program.

Benefits to the Children in our Program:

They are 46% less likely to initiate drug use.

They are 52% less likely to skip school.

Little Sisters and Little Brothers are more likely to attend university than their unmatched peers.

They have improved confidence, self-esteem and peer relationships.

Benefits to the Volunteers:

They experience greater personal satisfaction.

Have improved workplace satisfaction.

Gain valuable volunteer experience.

Benefits for the Community:

Healthy communities start with healthy children. The benefits of a child having a mentor extend far into the community. We see a reduction in school dropouts, poverty, drug use and crime in the children who were “at risk” prior to having a mentor.



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I. COMMUNITY-BASED MENTORING

Big Brothers/ Big Sisters Program:

Being a Big Brother or a Big Sister is all about being a friend to a Little Sister or Little Brother. It's about hanging out, eating pizza, watching a hockey game or a movie, or going for a while in the mountains. As a volunteer, your focus is on friendship. Our focus is making sure the matches are a "good fit". This means you will be matched to a Little Sister or Little Brother who shares your interests. Just like our volunteers, the children in our program have diverse interests and talents. We have kids who love board games, music, art, science and sports. For many "Littles", this program will be their only childhood opportunity to learn to ice skate, build a model, fly a kite, bake cookies, spend a day in the mountains or have an adult in their lives who is a trusted friend.

Our Big Brothers & Big Sisters

- ✦ *Are 18 years of age or older.*
- ✦ *Are available to see their Little Brother or Little Sister 2 -3 hours weekly for one year.*
- ✦ *Have no recent or anticipated life changes that would interfere with their commitment.*
- ✦ *Are employed, a student, or financially stable.*

Big Couples Program:

Being a Big Couple is a lot like being a Big Brother or Big Sister. Volunteering as a couple allows you to enrich your lives by spending time together and with a child who needs a friend. This unique two-to-one relationship is just like our other mentoring programs where focus is on building friendship by doing activities you all enjoy.

To help set the foundation for your new friendship we focus on making sure the match is a "good fit" for both of the volunteers and for the child. This new friendship will build self-esteem and confidence in a child who would benefit from having trusted friends and adults upon whom they can count. We believe that children benefit from seeing healthy adult interactions.

Our Big Couples

- ✦ *Are 20 years of age and over.*
- ✦ *Living together for two years with no separations.*
- ✦ *Are available to see their Little Sister or Little Brother 2 – 3 hours weekly for one year.*
- ✦ *Have no recent or anticipated life changes that would interfere with their commitment.*
- ✦ *Are employed, a student or financially stable.*



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II. SITE-BASED MENTORING

In-School Mentoring Program

Our In-School Mentoring programs matches a volunteer with a child in Grades 1 – 12. In-School Mentors are neither tutors nor classroom aides, and the visits focus around non-school related activities. The volunteer Mentor and the student meet in the child's school for one hour a week, for the duration of the school year, and spend time doing activities they both enjoy such as crafts, sports, and board games.

The children in our In-School Mentoring program are in need of a positive, caring adult role model and have been identified as such by a concerned teacher, school counselor or principal. Many of the children in the program are having trouble fitting in with their peer group. Their mentor may be the only friend or positive role model they have. This program is a collaborative effort between Big Brothers Big Sisters of Lethbridge and Lethbridge School District No. 51.

Our In-School Mentors

- ✦ *Are 18 years of age and over*
- ✦ *Are able to commit to visit the child one hour a week during the school day for one school year.*
- ✦ *Have access to transportation to and from the school.*
- ✦ *Have no resent or anticipated life changes that would interfere with the commitment.*

BENEFITS OF THE PROGRAM

During the In-School Mentoring evaluation process teachers and parents made the following comments at the end of the school year about their students who were involved with the program:

“(The) student gained a positive attitude toward spelling and reading”.

“(The student) doesn't cry as much. The girls play with her more”.

“(The student had) great improvement in self-esteem and behavior”.

“(The student was) more willing to share his ideas”.

“I am so pleased with (the child's) growth personally. (The child) feels happy!”

WHAT IS IT ALL ABOUT

The Mentor arrived at the school to find her Mentee intently studying a display on the school's wall. The Mentor asked her Mentee what he was looking at and he told her it was the “student of the week” tree. He said every time a student does something really well they get their name on a star, which then gets put on the tree. The Mentor suggested to her Mentee that he should try to get his name on a star. He looked at her intently and said, “I could never do that it is too much work” however throughout the visit the Mentor continued to encourage her Mentee. The next week when the Mentor visited her Mentee he came running excitedly down the hallway towards her and exclaimed “I did it; I got my name on the tree”.



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III. AGENCY POLICIES TO NOTE FOR ALL PROGRAMS

- ✦ A full assessment is made to determine the suitability of all volunteers.
- ✦ We require that potential volunteers refrain from using illegal drugs 6 months prior to and while matched in our program.
- ✦ Individuals who have had drug/alcohol addictions in the past must provide reasonable evidence that they have been drug/alcohol free for two years.
- ✦ Applicants who use medication to treat mental health concerns (e.g. depression) must wait one year before applying if any change in medication is made.

Research indicates that volunteers who do not see a child on a regular basis or do not fulfill a one-year commitment do more harm than good to a child.

IV. ELIGIBILITY FOR CHILDREN AND FAMILIES

- ✦ Children in our Big Brother/Big Sister and Big Couple programs are growing up in a single parent family. In some cases, children are accepted from two-parent families. Children are between the ages of 6 and 16. All children must want a Big Brother, Big Sister or Big Couple as a friend and have time to meet with their “Big” on a weekly basis.
- ✦ Children who are in our In-School Mentoring program have been referred to our agency through a teacher or principal. These children are in grades one through 12 and may be having trouble fitting in with their peers or may be experiencing some difficulties at home. This program is in Lethbridge School District No. 51.



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Volunteer Application

Application to volunteer with Big Brothers Big Sisters of Lethbridge & District in the following program:

- Traditional Big Brother/Big Sister
- Couples Matching
- In-School Mentoring
- Occasional Big
- Unsure _____

Date: _____

Full Name: _____

Address: _____

Postal Code: _____ Home Phone: _____

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

Email: _____

Age: _____ Date of Birth: _____

Volunteers must be older than 18 years old to volunteer with children and youth in our programs. Are you older than 18 years? Yes No

If you are interested in the *Couples Matching* program, how many years have you been in your relationship? _____ years

How did you hear about this program?

- | | | |
|--|--|--|
| <input type="checkbox"/> TV | <input type="checkbox"/> Radio | <input type="checkbox"/> Newspaper |
| <input type="checkbox"/> Current Volunteers | <input type="checkbox"/> Special Event | <input type="checkbox"/> Friend/Relative |
| <input type="checkbox"/> Billboard/Bus Shelter | <input type="checkbox"/> Former Little | <input type="checkbox"/> Website |
| <input type="checkbox"/> I've always known | <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 No

If yes, where and when? _____



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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 upcoming year? _____

How does your partner feel about you becoming a volunteer with Big Brothers Big Sisters of Lethbridge & District? _____

Education

Education Level: High School Trade School College
 University Other: _____

Name of last school attended: _____

Are you presently a student? Yes No Where: _____



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Housing

If you have been living at your current address for less than one year, please provide your previous address: _____

Does anyone in your home own firearms? Yes No

Do you live with others? Yes No

Are others visiting regularly? Yes No

Do you have pets? Yes No

Vehicle

Do you have access to a vehicle? Yes No

Does your vehicle have passenger airbags? Yes No

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

Have you ever been charged with any traffic violations (eg. speeding)? Yes No

Driver's License Number: _____

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 had any changes in your mental health in the last year? (i.e. been recently hospitalized for psychiatric counseling, are currently or been in counseling, are on medication for mental health concerns or have had any changes in your mental health medications within the last year)

Yes No If yes, please explain



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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?

The above information is accurate and true to the best of my knowledge.

Signature

Date



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Confidentiality Policy and Statement

The Definition – Concerning our clients and their families:

In the course of your service with Big Brothers Big Sisters of Lethbridge & District you may learn intimate, personal facts about clients, their families and their problems. We ask that you not discuss these matters with people in or outside this Agency, other than a Service Delivery Staff or Executive Director of the Agency.

The Declaration – Re: Protection of Confidential Information

I, _____ (please print name), have been made aware of the confidential nature of information concerning clients and their families applying for the Big Brothers and Big Sisters service with the agency. Whether or not such confidential information may be available to me in the normal performance of my service, or occasionally and inadvertently, the confidentiality will be respected.

I also understand that confidential information which shall be disclosed to me, or which may come to my knowledge, may not be divulged.

Name of Applicant (please print)

Name of Witness (please print)

Signature of Applicant

Signature of Witness

Date signed

Date signed



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Volunteer Reference List

Applicant's Full Name (please print)

All references must have known the applicant for at least two years. We require all reference categories be completed. Please print clearly and be sure to include area and postal codes.

Present Employer

Company Name: _____

Supervisor Name: _____

Email: _____

Address: _____

City _____ Prov. _____ Postal Code _____

Home Phone _____ Business Phone _____ ext _____

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

Please provide a previous employer if current employer has known you less than 2 years

Company Name: _____

Supervisor Name: _____

Email: _____

Address: _____

City _____ Prov. _____ Postal Code _____

Home Phone _____ Business Phone _____ ext _____

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



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Family Reference

Name: _____

Email: _____

Address: _____

City _____ Prov. _____ Postal Code _____

Home Phone _____ Business Phone _____ ext _____

Relationship to this person: _____

Character Reference (friend, spouse, roommate, teacher, professor)

Name: _____

Email: _____

Address: _____

City _____ Prov. _____ Postal Code _____

Home Phone _____ Business Phone _____ ext _____

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

Volunteer Work Reference (if applicable) or 2nd character reference

Name: _____

Email: _____

Address: _____

City _____ Prov. _____ Postal Code _____

Home Phone _____ Business Phone _____ ext _____

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



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Other Reference

Name: _____

Email: _____

Address: _____

City _____ Prov. _____ Postal Code _____

Home Phone _____ Business Phone _____ ext _____

How long have you known this person? _____ In what

I authorize the above listed references to be contacted by Big Brothers Big Sisters of Lethbridge & District in accordance with the release of information.

Signature of Applicant

Date



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Volunteer Permission and Release Form

I hereby authorize Big Brothers Big Sisters of Lethbridge & 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 references given about me.

I further authorize any individuals, firms, corporations, government or other regulatory departments, and Police Department or other organization to release information and copies of documents pertaining to myself to Big Brothers Big Sisters of Lethbridge & District 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 acknowledge and accept that this application does not guarantee acceptance into the program, and that Big Brothers Big Sisters of Lethbridge & District is under no obligation to accept or assign me as a volunteer in their program, and is not obliged to provide a reason.

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

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 give permission for Big Brothers Big Sisters of Lethbridge & 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 Lethbridge & 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 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 Lethbridge & District. I understand that if Big Brothers Big Sisters of Lethbridge & 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 75 years after the close of my final match.

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



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Date