



**Big Brothers Big Sisters
of Saint John**

Parent Information

Q What are the Big Brothers and Big Sisters programs?

- § Encouragement programs offered by volunteers for boys and girls. We match kids ages 6-14 years of age and support matches until a child is 16 years.
- § An opportunity for children to benefit from a one-to-one relationship with a caring, reliable person.
- § A way to expand the child's information about the world, his/her own family and neighbourhood.
- § By providing friendship and positive role models, the volunteers assist each child in reaching his or her full potential.

Q How does it work?

- § Each volunteer (called a Big) becomes a friend to one child (called a Little).
- § The Big meets with his/her child at the Big's home or in the community, where they do activities together.
- § Visits are usually each week and we use 3 hours as a guideline for time spent together. We emphasize, however, that some time is better than no time.
- § The Big and Little spend their time in ways that are of interest to the child (i.e.; crafts, physical activities, playing board games, visiting the library, talking, drawing, etc.)

Q Who are the Bigs?

- § Volunteers 18 years of age or older.
- § People who care about and enjoy spending time with children, and who can relate well to them.
- § Reliable people who will keep their appointments with the child.
- § People who are assessed, trained and supervised by the agency.
- § People who are asked to commit themselves to this volunteer work for at least one year.

Q What is the role of a parent in the Big/Little match?

- § Sign a Release of Information form before the program begins and give information about the child's interests, needs and history, so a suitable match can be made.
- § Understand there are a limited number of Bigs available, matches may not be possible for all children, and this may not be the right service for all children.
- § Support and participate in the Child Safety Program with your child.
- § Notice how the child reacts to the Big's visits (whether s/he looks forward to them).
- § Report any concerns to the Mentoring Coordinator immediately.
- § Support the child's friendship with the Big by letting the child know the parent is glad s/he is involved, and by asking questions about the activities they do together.
- § Give feedback to the program when asked by the Mentoring Coordinator.
- § Understand Big Brothers Big Sisters is a charity and must rely on donations to exist – the support of your matched relationship is not cost-free, it requires active fundraising. We ask parents and children receiving services to help in whatever way possible (volunteering or fundraising at events and educating the community about BBBS).

Q How does matching happen?

- § A parent completes the Enrollment Form, including a Release of Information form, with the child.
- § Once an Enrollment form is received, further information maybe collected from teachers and other community professionals who are involved with the child, to help the agency learn as much as possible about him/her.
- § The Mentoring Coordinator conducts interviews with both the parent and the child, and may visit the home to determine if this is the right program for your child.
- § Preference is given to children who have been waiting longest, and have the characteristics and interests most similar to the Big available.
- § The final decision to proceed with a match will only happen after discussion of the candidates involved with both the Big and the parent, and with the full support of the Big and the parent.
- § A match meeting is held with the Big, Little, parent, and Mentoring Coordinator, to begin the match and review the program guidelines with everyone present.

Q What may the benefits of this extra adult attention be for the children involved?

- § Children may become more self-confident as self-esteem improves.
- § Children may become more comfortable making friends and improve their communication.
- § Children may learn about different things and have new experiences.
- § Children may tolerate frustrations better.

Q What don't Bigs do?

- § Bigs don't do counseling.
- § Bigs don't do tutoring.
- § Bigs don't do parent support – run errands and provide transportation to parents.
- § Bigs don't give children expensive gifts nor are they expected to pay for all the activity costs during visits.
- § Bigs don't babysit and visits should not be seen as “child minding” – they are to be arranged at everyone's convenience.
- § Bigs don't punish bad behaviours as this is the parents' job.

Q What else should the parent know?

- § The organization does not discriminate against any volunteer on the basis or race, ancestry, political belief, religion, marital status, socio-economic status, physical ability, gender, sexual orientation, or age, except where such discrimination is based on a requirement of the position (e.g.; a volunteer's physical disability would prevent him/her from safely supervising the child, a volunteer's primary reason for volunteering is to preach religious principles). Therefore, your child's Big will only be assessed based on his/her ability to effectively interact with a child and be a positive role model.
- § BBBS is committed to diversity and welcomes social, physical and cultural differences that make up the richness and complexity of our communities. We are committed to being an inclusive movement in which differences are valued and respected in all aspects of service delivery and organizational practices.



**Big Brothers Big Sisters
of Saint John**

Little Brother/ Sister Enrollment

Please consider this my formal request for service with Big Brothers Big Sisters of Saint John for the following program(s):

Big Brothers Big Sisters Big Couple In-School Mentoring Big Bunch

Child's Name _____ Birth Date _____ Age _____

Address _____ Home Phone _____

Postal Code _____ School _____ Grade _____

Teacher _____ Language(s) Spoken _____

Parent/ Guardian #1	Parent/Guardian #2
Name _____	Name _____
Tel (home) _____	Tel (home) _____
Email _____	Address (if different) _____
Tel (work) _____	_____
Occupation _____	Tel (work) _____
Employer(s) _____	Employer(s) _____
Marital Status _____	Marital Status _____
May we contact you at work? _____	

Child lives with: Mother Father Other _____

Does the child have any contact with the other parent? Yes No

Describe the custody and visitation arrangements for the child (sole/joint/ amount of contact)

Is the other parent aware of your interest in Big Brothers Big Sisters? _____

Emergency Contact Person _____ Tel _____

Address (emerg. contact) _____

City _____ Postal Code _____ Relationship to child _____

Child's Medicare Number _____ Child's Doctor _____

Please list any agencies working with your family (this may impact the agency's funding):

List all people living in the home – related and non-related:

Name	Age	Relationship to child
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

How did you learn about Big Brothers Big Sisters programs? _____

Why do you feel your child would benefit from a Big Brother/ Big Sister/ Mentor?

Please comment on your child's general state of physical health, or on any emotional or behavioural concerns you may have. _____

Is there any information you would like to add to this application that will assist us to serve your child's needs better?

What is your child's attitude toward:

Parental authority?	<input type="checkbox"/> Good	<input type="checkbox"/> Average	<input type="checkbox"/> Poor
Adult authority outside home?	<input type="checkbox"/> Good	<input type="checkbox"/> Average	<input type="checkbox"/> Poor
Personal Hygiene?	<input type="checkbox"/> Good	<input type="checkbox"/> Average	<input type="checkbox"/> Poor
Having a Big Brother/ Big Sister?	<input type="checkbox"/> Good	<input type="checkbox"/> Average	<input type="checkbox"/> Poor

Signature

Date

The answers you have given will help us to do our best for your child. Please be sure to advise us of any changes in your home situation, such as address, phone number, or marital status.



**Big Brothers Big Sisters
of Saint John**

Informed Consent

This is my application to Big Brothers Big Sisters of Saint John. I understand that the organization will try to match a responsible person with my child to share activities, friendship and support, and that the organization will try to match my child with a volunteer who has some of the same interests. My child and I will participate in the Child Safety Program offered by Big Brothers Big Sisters of Saint John.

I give consent to Big Brothers Big Sisters of Saint John to talk to other professionals involved with my family so that the organization can understand my child's needs and decide whether they can serve my child and make a good match. I also agree that some of or all of the information may be shared, if the organization thinks it is necessary, with my child's Big Brother/ Big Sister, my child's teacher, and/or with the referring professional, so that my child's needs may be best met.

I understand that:

- § I don't have to accept a Big Brother/ Big Sister for my child,
- § the organization does not have to provide my child with a Big Brother/ Big Sister,
- § this application belongs to Big Brothers Big Sisters of Saint John. If the organization closes, this file belongs to Big Brothers Big Sisters of Canada, and
- § collection of personal information about myself or my child will be held in confidence and used to administer the program.

In consideration for this service and other valuable consideration provided to me and my child by Big Brothers Big Sisters of Saint John, I release the organization of all responsibilities and liabilities in connection to their service provided in good faith, to myself or my child.

I, _____, parent or guardian of _____, a minor, hereby release and forever discharge Big Brothers Big Sisters of Saint John, Big Brothers Big Sisters of Canada and their respective employees, directors and volunteers thereof from any cause of action or claim for damages, whether for bodily injury, property damage or emotional trauma, anxiety or distress arising from the association of my child with Big Brothers Big Sisters of Saint John.

Signed at _____ this _____ day of _____ .
(place) (1st, 2nd, etc.) (month and year)

(Signature of Parent/ Guardian)

(Signature of Witness over 18)

Please NOTE: if you have any questions or concerns about the information in this document, feel free to wait until you meet with a Mentoring Coordinator to discuss it further, or contact the office with your concerns.



**Big Brothers Big Sisters
of Saint John**

Media Consent

I, _____ (parent's name), hereby consent to Big Brothers Big Sisters of Saint John to use any photographs, audio, or video recordings of my child, _____ (child's name) as taken or produced by media personnel or Association Members or Association Staff for the purpose of publicizing and promoting the work of the Association.

I further waive any claim that I may have against Big Brothers Big Sisters of Saint John arising from the use of such photographs, audio or video recordings of myself, as aforesaid.

This consent and waiver shall remain in effect for the duration of my involvement with Big Brothers Big Sisters of Saint John unless otherwise revoked.

(date)

(Signature of Parent/ Guardian)

(Signature of Witness over 18)

If you do NOT want your child's photo to be used or if you have concerns please check here:

(date)

(Signature of Parent/ Guardian)

PLEASE NOTE: It is your responsibility to notify the office if the status of this publicity consent changes.