

Volunteer Application Checklist

- Volunteer Application completely filled in, signed & dated.
- Volunteer Permission & Release, signed & dated.
- Confidentiality Policy & Statement Form, signed & dated.
- Volunteer Reference List with complete address, phone number, email address and fax number, signed and dated.
- Intervention Record Check filled in, 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 of Lethbridge and District.
- 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 / Pre match Training Session.

Thank you for your interest in Mentoring

Application process for Community-Based Mentoring:

Pre-Match

Volunteers:

Initial Contact with Big Brothers Big Sisters Intake Caseworker

- ↔ BBBS receives Application, References, Police Check, CWIS Check and Insurance Policy copy
- ↔ Interview at Big Brothers Big Sisters
- ↔ (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 Big Brothers Big Sisters

- ↔ Program Information and Application sent to Parent
- ↔ Big Brothers Big Sisters receives Application Form **completed in full**
- ↔ Parent/Child Meeting at Big Brothers Big Sisters
 - Parent/Child Interview & Mandatory Parent/Child Pre-Match Training/Orientation
- ↔ Child Assessed for Approval
- ↔ Upon Approval Child placed on Waitlist

Matching Process

Volunteer chooses Mentee with Caseworker

- ↔ Volunteer and Parent meet at Big Brothers Big Sisters
- ↔ Initial Match Meeting with Volunteer, Child and Parent at Big Brothers Big Sisters Office
- ↔ The Match Begins
- ↔ Follow up as per National Standards – match supervision (phone calls, email, and in office meetings)

Application process for Site-Based Mentoring:

Pre-Match

Volunteers:

Same process as Community-Based program

Children:

Student identified by a school

- ↔ Teacher completes referral form and sends information package and consent form home with student
- ↔ Referral form and parent consent returned to Big Brothers Big Sisters
- ↔ Child placed on Waitlist

Matching Process

Caseworker 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 – match supervision (phone calls, email, and in office meetings)

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.

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 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.

Community Based Mentoring 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 going to a local event or activity. 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, and have an adult in their lives who is a trusted friend.

- 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.
 - Have lived in the community for at least 6 months. If under 6 months has reason to have moved to community such as school or work.
-

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.

- 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.
- Have lived in the community for at least 6 months. If under 6 months has reason to have moved to community such as school or work

Site-Based Mentoring In-School Mentoring Program

Our In-School Mentoring program matches a volunteer with a child in Grades 1 – 8. 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.

- 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.
 - Have lived in the community for at least 6 months. If under 6 months has reason to have moved to community such as school or work.
-

Teen Mentoring Program

Our Teen Mentoring program matches a volunteer with a child in Grades 1 – 6. The volunteers in the program are under the age of 18 and attend a corresponding High School. The volunteer Mentor and the student meet in the child's school at a scheduled time during the school year. Big Brothers Big Sisters Caseworkers are present for the sessions and facilitate the activities.

The children in our Site-Based Mentoring programs are in need of a positive, caring adult/youth role model and have been identified as such by a parent, teacher, school counselor or principal. Many of the children in the programs are having trouble fitting in with their peer group.

- Are 14-18 years of age (Grades 9-12)
 - Are able to commit to visit the child from October to March (15 Sessions).
 - Have access to transportation to and from the school.
 - Have no resent or anticipated life changes that would interfere with the commitment.
 - Have lived in the community for at least 6 months. If under 6 months has reason to have moved to community such as school or work
-

GameOn!

An all-boys group mentoring program providing boys and young men with information and support to make informed choices about a range of healthy lifestyle practices in 7 pre-designed sessions. Through non-traditional physical activities complimented with healthy eating, support, participants are engaged in life skills, communication and emotional health discussions designed to engage participants in the pursuit of life long healthy lifestyles.

GoGirls

An all-girls group mentoring program that incorporates fun, educational games and activities designed to stimulate self-reflection and group discussion completed in 7 designed sessions. The goal of Go Girls is to provide the girls and young women with information and support to make informed choices about healthy, active living while maintaining sensitivity toward emotional, social and cultural issues they may face.

- Are 18 years of age and over
- Are able to commit to 7 sessions
- Have no resent or anticipated life changes that would interfere with the commitment.
- Have lived in the community for at least 6 months. If under 6 months has reason to have moved to community such as school or work.

Agency's Responsibilities to the parent and child

- Adequate screening of the Mentor;
- Treating the child and parent/guardian respectfully
- Attention to the needs of the child
- Service free of charge
- A focus on child safety
- Training in the core topics and key messages of Big Brothers Big Sisters of Canada's Pre-Match Training
- Respecting the role of the parent/guardian in the child's life
- Checking in with the parent/guardian and child to ascertain satisfaction and progress of the match, etc.

Agency Expectation of Parent/Guardian and Child

- Being on time for visits
- Treating the staff with respect
- Being home when the mentor drops off the child (for parent/guardian in Community based Program)
- Reporting concerns and changes in life circumstances to the agency; etc.

Agency Expectation of Volunteer

- 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.
- Positive role model in the community
- Being on time for visits
- Treating staff with respect
- Reporting concerns and changes in life circumstances to the agency; etc.

Confidentiality

Due to the confidential nature of our programs all Volunteers will sign the Confidentiality Policy Document.

- **Any breach of this policy will be considered grounds for termination**

Eligibility for Children and Families

- 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 or scheduled program times.

Volunteer Application

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

<input type="checkbox"/> Traditional Big Brother/Big Sister	<input type="checkbox"/> Couples Matching
<input type="checkbox"/> In-School Mentoring	<input type="checkbox"/> Game On!/GoGirls
<input type="checkbox"/> Occasional Big	<input type="checkbox"/> Unsure _____

Date: _____

Full Name: _____

Address: _____

Home Phone: _____ Cell 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? _____

Employment

Current 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 and District?

Education

Education Level:

- High School Trade School College University Other: _____

Name of last school attended: _____

Are you presently a student? Yes No

If yes, name of school: _____

Housing

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

Do you live with others? Yes No

Does anyone in your home own firearms? 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: _____

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.)?

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

Confidentiality Policy

All staff and volunteers of Big Brothers Big Sisters of Lethbridge and 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. This could result in the disclosure of confidential information without written consent from the person to Brothers Big Sisters of Canada's insurers and or legal counsel, as may be appropriate in connection with any legal proceeding or inquiry;
- When subpoenaed by the courts;
- Where required by law;
- During periodic agency accreditation reviews case records, including relevant personal information will be shared to authorized representatives of Big Brothers Big Sisters of Canada.

In the event that confidential information is requested to support 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 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.

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

Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Home Phone: _____ Business Phone: _____ ext: _____

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

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

Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Home Phone: _____ Business Phone: _____ ext: _____

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

Significant Other (if no significant other exists, a family reference is required)

Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Home Phone: _____ Business Phone: _____ ext: _____

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

This information is true to the best of my knowledge.

Applicant Signature

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 Lethbridge and District (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 BBBSC 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