



Big Brothers Big Sisters

General Volunteer Application

Application Date _____

Volunteer Position Sought _____

Name _____

Home Address _____

Work Phone _____ Home Phone _____

EDUCATION

Highest Level of Education _____

EMPLOYMENT

Current Employer, if applicable:

Position/Title _____

Dates of Employment (starting, ending) _____

Company/Employer _____

Address _____

Would you like us to keep your employer abreast of your volunteer service and achievement? No Yes

SKILLS & EXPERIENCE

Special training, skills, hobbies _____

Groups, clubs, organizational membership's _____

Please describe your prior volunteer experience (include organization names and dates of service) _____

What experiences have you had that may prepare you to work as a volunteer in the field of [description of field, e.g., domestic violence, child abuse prevention, youth recreation, etc.]?

Why do you want to volunteer? [Or, what do you want to gain from this volunteer experience?]

Have you ever been convicted of a crime? [If yes, please explain the nature of the crime and the date of the conviction and disposition.] Conviction of a crime is not an automatic disqualification for volunteer work.

Do you have a driver's license? No Yes

Do you have car insurance? No Yes

Do you have a car available for transporting others? No Yes



REFERENCES

Please list three people who know you well and can attest to your character, skills, and dependability. Include your current or last employer.

Name/Organization	Relationship to you	Length of relationship	Phone number

Please check the boxes below to determine the level of volunteering you'd like to participate in.

Volunteer Time Based Commitment Chart	
One hour	<input type="checkbox"/> Make cards for an Ready to Match Kid (we are thinking of you) <input type="checkbox"/> Pen Pal program / ambassador <input type="checkbox"/> Tell a friend about BBBS (recruiting)
Three – Five hours	<input type="checkbox"/> Be a Big Brother or Big Sister <input type="checkbox"/> Office work (clerical projects) <input type="checkbox"/> Photographer <input type="checkbox"/> Activity events (help, coordinate, run events) <input type="checkbox"/> Tell 10 friends, bring a friend get a gift (spread the word campaign) <input type="checkbox"/> Small community based events (i.e. staff farmers markets, peace fest, "tabling events" getting our name out there)
Six – Ten Hours	<input type="checkbox"/> Participate as a representative for external events <input type="checkbox"/> Help Coordinate and Help Agency activities <input type="checkbox"/> Help Coordinate and Run Fundraising events <input type="checkbox"/> Join the board

Would you like to fund an event? _____ Yes _____ No

Donations Amount:

In honor of:



Please read the following carefully before signing this application:

I understand that this is an application for and not a commitment or promise of volunteer opportunity. I certify that I have and will provide information throughout the selection process, including on this application for a volunteer position and in interviews with Big Brothers Big Sisters that is true, correct and complete to the best of my knowledge. I certify that I have and will answer all questions to the best of my ability and that I have not and will not withhold any information that would unfavorably affect my application for a volunteer position. I understand that information contained on my application will be verified by Big Brothers Big Sisters. I understand that misrepresentations or omissions may be cause for my immediate rejection as an applicant for a volunteer position with Big Brothers Big Sisters or my termination as a volunteer.

Signature _____ Date _____



Big Brothers Big Sisters

Photographic, Video, Audio and Web Consent and Release

Big Brothers Big Sisters of Racine and Kenosha Counties, Inc., often uses photographs, slides, films and other images or recordings of participants for educational, programmatic, public relations and accountability purposes.

Such photographs or other illustrative material may be used in newsletters, media presentations, or publications produced by Big Brothers Big Sisters or agencies contracted by or in collaboration Big Brothers Big Sisters. Neither individual addresses nor telephone numbers will be published within these materials.

This form allows you, as a volunteer, to choose whether you wish to be in films, videos, illustrations or written text used by Big Brothers Big Sisters.

____ Yes, I give permission to Big Brothers Big Sisters to make photographs, slides, audio, video other recordings, or written text of me. Further, I authorize their use, for Big Brothers Big Sisters, without inspecting or approving the finished product or its specific use. I hereby release to Big Brothers Big Sisters all rights to exhibit this work publicly or privately, including posting to the Big Brothers Big Sisters. I waive any rights I may have to receive compensation or additional consideration.

____ No, I do not give permission for the creation or use of photographs, slides, audio, video, other recordings, or written text of me by Big Brothers Big Sisters or in Big Brothers Big Sisters media presentations.

Volunteer's Name (Please Print): _____

Volunteer's Signature: _____ Date: _____

If volunteer is under the age of 18, permission of the parent or guardian is required.

Parent/Guardian Signature: _____ Date: _____



Big Brothers Big Sisters

Authorization to conduct background check

Notice of Intent to Procure Consumer Report (Background Check)

This notice is to inform you that as part of our evaluation procedure for volunteering, employment, promotion or retention, we may obtain and review consumer report(s) and/or investigative consumer report(s) for employment purposes concerning you (Background Check).

Authorization to Conduct Background Check:

By signing below, I authorize Information Resources, to conduct an employment-related background check on me and to provide the results to Big Brothers Big Sisters of Racine and Kenosha Counties. I understand this report may contain information as to my character, general reputation, personal characteristics, or mode of living, such as my work habits, work performance and experience, reasons for discipline or termination from any current or prior employment, history of earnings, credit worthiness, credit standing or credit capacity, criminal convictions, driving history, and other related matters that may concern my eligibility for the position or promotion I am seeking.

Information Resources will not provide any information where such disclosure is restricted by federal or state law.

By signing below, I authorize any present or past employer, supervisor or agent of the employer; high school, college, university or other institution of learning; local, state or federal court; department of motor vehicles, military branch or the national personnel records center; state sex offender registry, state licensing board, state workers' compensation agency, credit bureau, personal or professional reference; to release records or information to Information Resources concerning my name, criminal history, motor vehicle history, social security number, earnings history, credit file, address history, educational history, character, reputation, and employment (including documented reasons for termination or discipline) and release such from any and all liability for any damage that may result from the furnishing of this information. This authorization shall be valid in original, faxed or photocopied form.

Name:

Date of Birth _____ **Social Security number** _____

Driver's License Number _____

Signature: _____ **Date:** _____