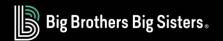


Thank you for your interest in becoming a Big Brother or Big Sister. Please submit completed application via email to **enrollment@ncbbbs.org** or fax to **707-445-1405**; or hand deliver or mail to **428 C Street Suite G Eureka**, **CA 95501**.

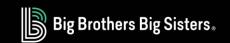
Along with this application, you will need to submit a copy of a government-issued photo ID, as well as your driver's license (if not used as your government-issued photo ID), and proof of auto-insurance, if you plan to transport a child within the community-based program. All applications will be given equal consideration regardless of race, age, sex, disability, marital status, sexual orientation, religion or national origin.

GENERAL INFORMATION

First Name:	Middle Name: Last Na		ame:		Preferred Name:			
Home Phone #:	ome Phone #:		none #:		Is it okay to text you? Yes No Cell phone Provider:			
Home Address:	ddress: City:			County	7:	State:		Zip:
Personal E-mail: Work E-mail:			How do you prefer to be contacted? (Phone, e-mail, time of day, etc.)			d?		
Social Security Number:				Gender: M		Marital St	atus:	
Date of Birth:				If applicable, maiden n			le, maiden name:	
Race/Ethnicity: American Indian or Alaska Native Asian Black or African American Hispanic or Latino Native Hawaiian or Pacific Islander White				Other	America Asian Black or Hispania	n Indiai African c or Lati	neck all that n or Alaska No American ino n or Pacific Is	ative
Nationality/Country	Nationality/Country of Origin:							



Occupation:		How	Long Employed?	Work Hours?		
Highest Level of Education:		Are you a student at this time? Yes No				
Area of Study:			Are you a student at this time? Yes No			
Do you have current or past military experience? Yes No Dates of Service:						
Branch: Air Force	ArmyMa	rine Co	orps Navy	Coast Guard		
Component: Active Nation	al Guard Reserve		re you retired? Yes re you separated/discl Yes No	No narged (other than retired)?		
Honorable	discharged, please check General (under honorabl Ionorable Conditions	le cond	litions)	/discharge: onorable		
Possession of a driver's license operating.	is required if you will be t	transpo	orting a program youth	in any vehicle you are		
Do you have a current and valid driver's license?	If yes, state of issue and	d #:	Do you have a vehicle Yes No	e?		
□Yes □No	Expiration date:		-	surance that meets or ed minimum? Yes		
1. Have you previously applied Yes No If yes, when and where	_	Brothe	er or Big Sister here or	anywhere else?		
2. Have you ever been involved Yes No If yes, when and where	o o	Sisters	in a capacity other th	an a Big?		
3. Have you ever been involved Yes No If yes, when and where		r anotł	ner youth organization	n?		
Have you ever been denied acceptance or released from service as a volunteer or employee for another Big Brothers Big Sisters program or youth-serving organization? Yes No If yes, when and where?						



5. Are you intereste mission? Yes	ed in learning about add	litional ways to o	contribute to the Big	Brothers Big Sisters				
	If yes, please check all interests that apply.							
☐ Becoming a	Becoming a donor							
Helping to recruit volunteers								
Volunte	Volunteering at agency events for matches, Littles, waiting-list children, etc.							
☐ Volunteeri:	☐ Volunteering at agency fundraising events							
☐ Inviting BI	☐ Inviting BBBS to speak at a company, church, organization, or other group of which I am a							
member	-		-	_				
REFERENCE INFORMATION	JN							
Please list information	n for at least three refere	ences below inclu	ding:					
1. Your spouse or	domestic partner (i.e., if	f you live with a s	ignificant other/ girlfr	iend/boyfriend) OR a				
family member	r, if you do not have a spo	ouse, partner, or s	significant other);					
2. Current or for	mer employer or co-wor	ker you have kno	own for at least one ye	ar, or someone from				
your school if y	you are a student; AND							
3. A friend or neig	ghbor you have known fo	or at least two yea	ars.					
	3. A friend or neighbor you have known for at least two years.							
Spouse/Partner's na	Spouse/Partner's name: Family member name (if no spouse/partner):							
Address:		City:	State:	Zip:				
Day Phone #:	Cell #:		Email:					
Day Filone #.	Gen #.		Liliali.					
Employer or Co-wor	ker (current or past) or s	school personnel	(if you are a student):					
Address:		City:	State:	Zip:				
Day Phone #: Cell #:			Email:	1				
Friend, Neighbor, or	other personal referen	ce:						
Address:		City:	State:	Zip:				
Day Phone #:	Cell #:		Email:					



In addition to the references above, Big Brothers Big Sisters requires references from all <u>youth serving</u> <u>organizations</u> at which you have worked or volunteered in the past. Please list additional on separate page, if needed.

Organization name:		Dire	Direct supervisor:				
Address:		City	City:		State:	Zip:	
Day Phone #:	Day Phone #: Cell #:			Email:			
Dates of involvement/employn	nent:						
Reason for leaving:							
Organization name:			Direct supervisor:				
Address:	Address: City		ty:		State:	Zip:	
Day Phone #: Cell #:			Email:				
Dates of involvement/employn	nent:						
Reason for leaving?							
Organization name:			Direct supervisor:				
Address:		City:			State:	Zip:	
Day Phone #: Cell #:		Email:					
Dates of involvement/employment:							
Reason for leaving:							

I CONSENT TO AND UNDERSTAND THAT:

- The references and youth serving-organization I listed may be contacted by mail, telephone, email, or in-person;
- 2) The information I provided may be used to conduct a background check, to include a search of public domain records, driving records check, juvenile and adult criminal history check (see attached authorization), military records, and other records where required by local, state, or federal law for volunteers working with youth;
- 3) I am in no way obligated to perform any volunteer services;
- 4) The BBBS agency is not obligated to match me with a youth and may deny my application or close my match at any time, and to protect all participants' confidentiality, BBBS is not required to disclose reasons for doing so;
- 5) Other BBBS agencies and youth organizations where I have worked or volunteered may be contacted as references;
- As part of the enrollment processes, I will be required to provide additional personal information, including completion of an in-person interview;
- 7) I understand that the information I provide in the enrollment process will be kept confidential, unless disclosure is required by law and with exceptions noted below.
- 8) I understand that incidents of child abuse or neglect, past or present, must be reported to proper authorities;
- 9) I understand that certain relevant information about me will be discussed with the parent/guardian of a child who is a prospective match (this might include demographic information, information relevant to parent/child preferences, and any information relevant to a child's safety or well-being);
- 10) It is my responsibility to update the agency if any of the information I provide on this application, in my interview, or any other information provided during the enrollment process changes (i.e. address, phone number, auto-insurance, new criminal charges, etc.).
- 11) I agree to timely communication and follow-up with all agency staff.

n:		D - L	
510	ınature:	Date:	
:	,	 	



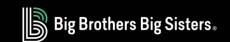
PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING THIS APPLICATION:

I understand that this is an application for a volunteer opportunity and is not a promise or commitment by Big Brothers Big Sisters.

I certify that all information I have provided or will provide to Big Brothers Big Sisters, including this application, 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 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 or my termination as a volunteer.

At any time while involved with the Big Brothers Big Sisters program, I agree to immediately inform my Big Brothers Big Sisters contact person of any and all infractions, violations, charges and convictions related to any civil, domestic, or criminal occurrences. I understand that BBBS staff needs to be fully informed to provide the best guidance or support possible.

Signature:	Date:			
If applicant is under the age of 18, co-signature of criminal history record check information:	of a parent/guardian is required for application and to obtain			
Parent/Guardian Printed Name:				
Parent/Guardian Signature	Date:			

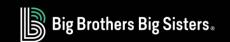


VOLUNTEER PRE-INTERVIEW QUESTIONNAIRE

Prior to your in-person interview, please answer the questions below. Parents of youth in our programs will often ask questions about someone with whom their child will be matched. The information you provide will also help us make a better match for you and assure we can support you during your involvement with our program. Please note that you will have an opportunity to discuss these questions and your responses more thoroughly during your in-person interview.

1.]	Do you have any concerns about your ability to fulfill the 12-month commitment required of mentors? Yes No
2.	Do you anticipate any significant life changes over the next year or had any this past year? Yes No
	Please describe:
3.	Have you ever been accused, arrested, charged, or convicted of a crime? Yes No
4.	Have you had any driving citations and/or moving violations in the past 5 years? Yes No
5.	Do you have guns, ammunition, or other weapons in your house? Yes No
6.	Do you speak any foreign languages? Yes No
7.	Is there anything else you'd like to tell us about yourself or any questions that you have?
8.	Please list any counties and states that you have lived in aside from your current address in the past 5 years.
I have	answered these questions honestly and completely to the best of my knowledge.
 Signa	ture Date
	Media Release

Upon occasion photos or videos of participating children are used for brochures, posters, Social Media or miscellaneous promotions to be used by Big Brothers Big Sisters of the North Coast. I hereby consent to and authorize the use and reproduction by BBBSNC, or any authorized agent, of any photographs, video, or audio



recording which BBBSNC has taken of

my child without further compof the North Coast. Yes	pensation to me. All photos and videos are	the property of Big Brothers Big Si
	VOLUNTEED INTEREST FINDER	
NIA NA E	VOLUNTEER INTEREST FINDER	DATE
NAME:		DATE:
Please look through the followi	ng activities and write a letter next to any th	nat interest you…
	Write <u>E</u> next to activities you enjoy	<i>(</i>
	Write next to activities you enjoy	v sometimes
	Write next to activities you woul	
PORTS	OUTDOOR ACTIVITIES	BEING CREATIVE
Archery	Backpacking	Arts & crafts
Baseball/softball	Boating/sailing	Beads/jewelry
Basketball	Camping	Collage
 Bowling	Fishing	Cooking/baking
Football	Gardening	Dancing
 Frisbee	Hiking	Drama
 Golf	Horseback riding	Drawing/painting
 Bicycling	Hunting	Embroidery
Gymnastics	Picnics	Fixing things
Hockey	Rafting/canoeing	Knitting/crocheting
Jogging	Skateboarding	Mechanics/cars
Martial arts	Snowboarding/skiing	Model building
Racquetball	Surfing	Music
Roller-skating		Photography
Soccer	INDOOR ACTIVITIES	Sculpting clay/pottery
Swimming	Board games	Sewing
Tennis	Card games	Singing
Volleyball	Chess	Welding
VING FUN	Computers	Wood working
Art shows	Pool/billiards	Writing stories/poetry
Beach	Puzzles	
Circus	Reading	COLLECTING
Concerts	TV/movies	Baseball cards
Fairs	Video games	Bugs/insects
Forest	<u> </u>	Coins
Kite flying	EXPLORING	Comics
Museums	Animals	Rocks
Parks	Dinosaurs	Shells
Plays	Electronics	Stamps
Pool	History	-
Puppets	Insects	OTHER ACTIVITIES
Races	Oceans	O I I LENACTIVITES
Rivers	Plants	
Window shopping	Rocks/minerals	
Zoo	The earth & stars	