

If you have been living in your current address for less than one year, please provide the city /town where you lived previously.

Do you anticipate moving from Saskatoon within the next year?

Do you Anticipate any changes in your life in the next year that may impact your match (e.g. Marital Status, Living arrangements, employment, Children, etc.) Yes No

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 any pets?	Yes	No

Optional: Ethnicity (used only for statistical purposes): _____

Marital Status:	Single Married	Separated Divorced	Common-law Widowed
-----------------	-------------------	-----------------------	-----------------------

Partner's Name: _____

Do you have children? Yes No

Number of Children: _____ Ages of girls: _____ Ages of boys: _____

In Case of an emergency, whom should we notify? (name, address, phone, relationship) _____

Employment:

What is your occupation? (If student please indicate program) _____

Employer: _____

Work Address: _____

Length of time at present employment: _____

Does your work take you out of town for extended periods of time? _____

Do you own or have access to a vehicle? Yes No

Does it have passenger-side airbags? Yes No

3. Driver's License # _____

Other Interests

Please list any clubs, affiliations or organizations of which you are a member? _____

What are your interests, hobbies or activities? _____

Please consider this application with Big Brothers Big Sisters of Saskatoon & Area, Inc. in the following Program:

- | | |
|---|--|
| <input type="checkbox"/> Big Brothers Match | <input type="checkbox"/> Buddy Match |
| <input type="checkbox"/> Big Sisters Match | <input type="checkbox"/> Couple Match |
| <input type="checkbox"/> Youth in Care | <input type="checkbox"/> Group Only |
| <input type="checkbox"/> Momentum | <input type="checkbox"/> The Good Road |
| <input type="checkbox"/> Go Girls! | <input type="checkbox"/> Unsure |
| <input type="checkbox"/> In- School Mentoring Program | <input type="checkbox"/> Other |

How did you hear about this program?

TV Radio Newspaper Current Volunteer Special Events
Friend/Relative Bill Board Former Little Website I've always known
Other (please specify): _____

Have you ever been, or applied to be a volunteer with a Big Brother Big Sisters agency in the past?

Yes No

If yes, where and when? _____

Why do you want to become a volunteer in the program now? _____

SECTION B - REFERENCES

The names of the first three references are required. All of the references must be at least 18 years old and have known you for two years. If you have not had an employer for two years, your current employer's reference is required with a professional reference (volunteer, professor, etc), who has known you for two years. The fourth reference is also required if you have worked or volunteered with children. Each one will be contacted to ask for information regarding your suitability to act as a volunteer mentor. Note: References can't be your spouse, girlfriend/boyfriend, or partner.

PLEASE PRINT

1. Name of Present Employer: _____
Address: _____
City: _____ Postal Code: _____ Time Known: _____
Occupation/Name of Firm: _____
Telephone (Home) _____ (Work) _____
Email Address _____

2. Name of Parent(s): _____
Address: _____
City: _____ Postal Code: _____
Occupation/Name of Firm: _____
Telephone (Home) _____ (Work) _____
Email Address _____

3. Name of Friend: _____
Address: _____
City: _____ Postal Code: _____ Time Known: _____
Occupation/Name of Firm: _____
Telephone (Home) _____ (Work) _____
Email Address _____

4. Name of Organization in which you have worked/volunteered with children (If Applicable): _____

Address: _____
City: _____ Postal Code: _____ Time: _____
Contact Person: _____
Telephone (Home) _____ (Work) _____
Email Address _____

Volunteer Permission and Release Form

I hereby authorize Big Brothers Big Sisters of Saskatoon & Area, Inc. 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 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 Saskatoon & Area, Inc. 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 Saskatoon & Area, Inc. 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 Saskatoon & Area, Inc., 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 of distress arising from my Agency with Big Brothers Big Sisters of Saskatoon & Area, Inc..

If I am matched, I understand that I am solely responsible for the care of the Child with whom I am matched during outings and activities. I agree to have constant supervision while the Child is in my care.

I give permission for Big Brothers Big Agency of Saskatoon 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 Saskatoon & Area, Inc. permission to release my name, date of birth, agency applied to and notice of acceptance or rejection 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 Saskatoon & Area, Inc. I understand that if Big Brothers Big Sisters of Saskatoon & Area, Inc. should cease operation, my complete file becomes the property of Big Brothers Big Sisters of Canada.

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

Date