



**VOLUNTEER APPLICATION**  
**Private and Confidential**

Big Brother  Soar   
Big Sister  Recreation Mentor   
Big Couple/family  In-School Mentor   
Male  Female

Applicant's Full Name: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Number: (\_\_\_\_) \_\_\_\_\_

Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Other languages spoken: \_\_\_\_\_

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

Family/ Permanent address (if different from above):

Street: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

**Employment/Education:**

Employed  Unemployed  Student  Retired   
Education: High School  College  University  Other  \_\_\_\_\_

If student, where and what course of study? \_\_\_\_\_

Year of study? \_\_\_\_\_

Current employment: \_\_\_\_\_

Occupation: \_\_\_\_\_ Title: \_\_\_\_\_

Business Address: \_\_\_\_\_

Email address: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Length of time: \_\_\_\_\_

Can you be reached at work? Yes  No

**How did you hear about this program?**

TV  Radio  Newspaper  Brochure  
 Current Volunteers  Special Event  Friend/Relative  
 Billboard/Bus Shelter  Former Little  Website  
 Former Big  Other: \_\_\_\_\_

**Health:**

Name any medical conditions of which we should be aware: \_\_\_\_\_  
\_\_\_\_\_

**Current Family/Marital Status/Personal:**

Single (never married)  Married  Common-law  Divorced  Separated  Widowed

Name of Partner: \_\_\_\_\_

# of Children: \_\_\_\_\_

Name and Ages: \_\_\_\_\_

Name and Ages: \_\_\_\_\_

Name and Ages: \_\_\_\_\_

Name and Ages: \_\_\_\_\_

**Car:**

Do you have a driver's license? \_\_\_\_\_ Car? \_\_\_\_\_ Use of a Car? \_\_\_\_\_

Does your vehicle have passenger air-bags? Yes  No

Do you have a one million dollar auto insurance coverage? Yes  No

Have you ever been charged with any traffic violations Yes  No

Have you ever been, or applied to become a volunteer with a Big Brother/Big Sister agency in the past? Yes  No

If so, where and when? \_\_\_\_\_

Have you ever been accused, arrested, charged, convicted with or pardoned for a crime? Yes  No

If "Yes", please specify: \_\_\_\_\_  
\_\_\_\_\_

Signature of Applicant

Date

Big Brothers Big Sisters of Hamilton & Burlington  
639 Main Street East, Hamilton L8M 1J4  
Telephone: 905-525-3860 Fax: 905-525-6444  
www.callbigbrothers.com  
[info@callbigbrothers.com](mailto:info@callbigbrothers.com)

**Reference Sources:**

**Employment/Teacher or Volunteer Reference:**

Name: \_\_\_\_\_

Company: \_\_\_\_\_ Position: \_\_\_\_\_

Business Address: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Work Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Home Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Email address: \_\_\_\_\_

**Family Reference:**

Name: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Work Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Home Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Email address: \_\_\_\_\_

**Personal / Character Reference: REFERENCE MUST HAVE KNOWN YOU FOR A MINIMUM OF 3 YEARS.**

Name: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Work Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Home Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Email address: \_\_\_\_\_

**Personal / Character Reference: REFERENCE MUST HAVE KNOWN YOU FOR A MINIMUM OF 3 YEARS**

Name: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Work Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Home Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Email address: \_\_\_\_\_

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I acknowledge and accept that this application does not guarantee acceptance into the program, and that Big Brothers Big Sisters of Hamilton & Burlington is under no obligation to accept or assign me as a volunteer in their program, and is not obliged to provide a reason.

If I am matched, I understand and will abide by the job description and code of conduct related to my volunteer position. I agree to abide by the confidentiality guidelines of the Agency.

I hereby authorize Big Brothers Big Sisters of Hamilton & Burlington 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 hereby waive the right to request disclosure of the personal reference given about me.

I give permission for Big Brothers Big Sisters of Hamilton & Burlington 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 Hamilton & Burlington permission to release my name, date of birth, agency applied to and notice of acceptance, rejection or withdrawal to Big Brothers Big Sisters of Canada and for pertinent facts related to my status 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 Hamilton & Burlington. I understand that if Big Brothers Big Sisters of Hamilton & Burlington should cease operation, my complete file becomes the property of Big Brothers Big Sisters of Canada. I understand that the information in my file will be retained by Big Brothers Big Sisters of Canada for a period ending 100 years after the close of my final match.

I hereby release and forever discharge Big Brothers Big Sisters of Hamilton & Burlington 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 or distress arising from my association with Big Brothers Big Sisters of Hamilton & Burlington.

**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.**

**I fully understand that the Agency, following review of my application, reserves the right to accept or refuse my application. I acknowledge and accept that this application does not guarantee acceptance into the program, and that Big Brothers Big Sisters of Hamilton & Burlington is under no obligation to accept or assign me as a volunteer in their program, and is not obliged to provide a reason.**

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Signature of Applicant

Date

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Parental Signature (if applicant is under 18 years of age)

Date