



Client/ Volunteer/ Mentor Position definitions:

Clients: Completed Client Application Required

- **Little-** a child age 6-14, in need of a mentor.

Mentors: Completed Big Application Required

- **Big:** A single individual 16 or older who volunteers to mentor a youth for the duration of 1 year.
- **Big Couple:** Two people 16 or older who reside in the same residence or have an established relationship who volunteers to mentor a youth for the duration of one year.
- **Big Families:** a family who volunteers to mentor a youth for the duration of one year. Please note all individuals in the household 16 or older must submit a completed Big Application

Volunteer: Completed General Volunteer Application Required

- **Greeters:** The person is the executive of first impressions. Their role is to stand by the front door and welcome guests as they arrive, encourage their sign in and direct them to the activity area.
- **Registration staff:** Manage the registration process. They are responsible for collecting any dues owed, registering participants as needed and handing out the agenda and supportive documents.
- **Event Ambassadors:** These individuals are responsible for increasing awareness about the agency or the event being held.
- **Activity Leads:** These are the event hosts and individuals for managing the event from start to finish. They are the MC, the go-to person and sample of what should take place.
- **Chaperones:** Additional volunteers who participate in events and outings to ensure all participants have the proper support and attention.
- **Set up:** Volunteers responsible for ensuring all necessary materials are ready and available and the event is ready to kick off without a hitch at its start time.
- **Clean up staff:** These volunteers are responsible for tear down and clean up. They are responsible for ensuring that all items are returned to their proper location, trash is collected, disposed of and taken out and the agency is cleaned, and returned to working conditions.



Big Brothers Big Sisters Of Racine and Kenosha Counties

CLIENT APPLICATION

For Office Use Only:

Age DOB Ethnicity M / F Pov. Lev. Y N Incarcerated Parent Y N I-94 E W

Child's Social Security # _____ Application Date _____

Child's Full Name _____

Child's Age _____ Birth date _____ Race _____

Home Address _____ City _____ Zip _____ Phone _____

Parent or Guardian's Name _____

Cell phone number: _____ Email Address: _____

Absent Parent's Name (if applicable) _____ Location _____

Does he/she know you are seeking Big Brother/Sister services? _____

Will he/she object? _____ Frequency of contact with child _____

Military Service (Father or Mother)? _____ Are you a participant of W-2? _____

Parent/Guardian Employer _____ Religion _____

Child's School _____ Grade ____ Teacher _____

Counselor or Social Worker, if applicable _____

Others in the home:

Name	Age	Name	Age
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Number of children applying for services _____

Why are Big Brother/Big Sister services desired?

Name & Phone Number for emergency/message

This application filled out by _____

For Office Use Only

Tracking Dates:

Inquiry _____

Orientation _____

Interview _____

Home Visit _____

Child Interview _____

Parent Interview _____

Joint Interview _____

CSAP _____

Acceptance/rejection (circle one)

Date _____

Notification _____

BB/BS _____

Matched _____ Term _____

BB/BS _____

Matched _____ Term _____



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: _____



Online Social Networking Guidelines

Big Brothers Big Sisters of Racine and Kenosha Counties recognizes that online social networking (Facebook, MySpace, Twitter, LinkedIn, Blogs, etc.) has become a very popular communications tool and that many of our Bigs and Littles use these websites. In general, personal use of social networking sites is for communications between peers, including friends and family. Big Brothers Big Sisters wants to reiterate that a Bigs relationship with your Little is that of a mentor, in addition to a friend. Not all social networking sites are designed to support mentoring relationships.

If you do choose to participate in a social networking site, you must adhere to the following guidelines regarding any postings related to your match or affiliation with Big Brothers Big Sisters (BBBS):

1. Please proceed thoughtfully when inviting or accepting an invitation from your Little/Big to a social networking site. If you have any doubts, please discuss your concerns with your Program Manager and/or postpone your invitation or acceptance.
2. Bigs are not to participate in a social networking site with their Little unless you have discussed this with them and granted approval.
3. If you do choose to participate in a social networking site(s) with your Big, parents/guardians and Big Brothers Big Sisters will need information regarding all related website addresses and access to all pages so that we can follow along with your postings.
4. Bigs are to never post any pictures of your Little online unless they have the written consent of the child's parent/guardian. That consent form shall be on file with BBBS.
5. Bigs are to never post the last name of their Little, his/her parent/guardian, or BBBS staff.
6. Bigs are to never post their Little's contact information.
7. Bigs are to never post any identifying information about their Little (i.e., child's home address, school the child attends, where the parents work, etc.)
8. Bigs are to never post anything that could be perceived as judgmental or offensive to their Little or his/her parent/guardian.
9. Matches are to make sure that all page settings are set to private, so that only people you approve can view your online content. Bigs are to ensure that BBBS and the parent/guardian are approved if you plan to post content related to your match.
10. All parties are to honor confidentiality guidelines within the match. Be cautious when posting detailed information about conversations with your Big, their parent/guardian or with BBBS staff. Posting generalized information or status updates is typically appropriate, but lengthier postings or blogs containing in-depth information should not be posted.
11. Be aware of other postings on your page that are not BBBS related or are inappropriate for minors. Know that as a Big Brothers Big Sisters participant/volunteer you are a role model at all times. Please ensure that all content is appropriate and kid-friendly, in the event that your friends or family were to read your social networking page.
12. When in doubt about whether or not something is appropriate to post, consult with your Match Support Coordinator prior to posting.
13. Please emphasize with any posting that refers to Big Brothers Big Sisters that the opinions you express are your own and may not reflect those of the agency.

Failure to adhere to these guidelines **could affect the status of** your match. Please sign below to certify that you have read and understood the information provided in regards to social media.

Print name: _____

Signature: _____ Date: _____



Appeals Process

An applicant or volunteer may appeal non-acceptance or termination of participation to the Program Committee of the Board of Directors of Big Brothers/Big Sisters of Racine and Kenosha Counties, Inc.

Requests for appeals must be made in writing to the Executive Director. At such time, information gathered during the application process, and any subsequent information, will be shared with the Program Committee.

The decision of the Program Committee regarding an appeal will be communicated within 45 days from the receipt of the appeal. The Program Committee Chair or designee of the Chair will communicate their decision and the decision is final.

Parent / Guardian Big Brothers Big Sisters of America Release & Authorization

I understand that all information is confidential but may be accessed by the Board and Staff of Big Brothers Big Sisters of Racine and Kenosha Counties, Inc. Under certain conditions and with prior approval of the Board, information may be released to Big Brothers Big Sisters of America, our legal counsel, and/or in response to a subpoena for information.

Information I have provided regarding my child(ren) may be shared with the volunteer.

Having read and understood both the Appeals Process and Confidentiality Agreement, I give permission for my child(ren) to participate in the Big Brothers Big Sisters Program.

Signed by Parent / Legal Guardian _____

Date: _____

Acknowledgment & Information Accuracy Certification

Please read the following carefully before signing this application:

I understand that this is an application for and not a commitment or promise of a mentoring opportunity. I certify that I have and will provide information throughout the selection process, including on this application for a mentor 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 mentor. 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 mentor with Big Brothers Big Sisters or my child's termination as a Little or ready to match youth.

Signature _____ Date _____



Kenosha Unified School District No. 1
Office of Student Support
3600 52nd St., Kenosha, WI 53144
(262) 653-6276

Parent Permission to Obtain or Release Information
(Kenosha Parents Only)

Name: _____ I.D. No.: _____ DOB: _____ Date: _____

I, the undersigned, hereby request and authorize Kenosha Unified School District No. 1 to release to/obtain from:

[School, agency(s), or person]

- Official student academic/administrative records (identifying information, grade level completed, grades, class rank, attendance records, and group aptitude/achievement test results)
- Medical and/or related health records
- Psychological evaluations/social work reports
- Multidisciplinary team evaluations and related reports
- Appropriate agency reports
- Individualized education program
- Other (specify) _____

This permission is valid for one year from the date signed. A copy of this form is as effective as the original.

Signature of parent(s)/guardian(s)

Date

Send information to:

Name: _____
School: _____
Address: _____
City, State: _____
Zip _____



Racine Unified School District
Administrative Service Campus
3109 Mt. Pleasant St. • Racine, WI 53404
(262) 635-5600 • info@rusd.org

Parent Permission to Obtain or Release Information
(Racine Parents Only)

Name: _____ I.D. No.: _____ DOB: _____ Date: _____

I, the undersigned, hereby request and authorize Racine Unified School District No. 1 to release to/obtain from:

[School, agency(s), or person]

- Official student academic/administrative records (identifying information, grade level completed, grades, class rank, attendance records, and group aptitude/achievement test results)
- Medical and/or related health records
- Psychological evaluations/social work reports
- Multidisciplinary team evaluations and related reports
- Appropriate agency reports
- Individualized education program
- Other (specify) _____

This permission is valid for one year from the date signed. A copy of this form is as effective as the original.

Signature of parent(s)/guardian(s)

Date

Send information to:

Name: _____
School: _____
Address: _____
City, State: _____
Zip _____



Volunteer Preference Form

Please indicate below what type of volunteer Big Brother/Big Sister would be a good fit for you child. Please be honest in your answers. We will take your preferences into account when we suggest a possible match for your child.

Please check how you feel in the following areas:

<u>I prefer</u>	<u>I will accept</u>	<u>I will not accept</u>	
_____	_____	_____	a single or divorced person
_____	_____	_____	a married person
_____	_____	_____	a person cohabiting (not married, living with someone)
_____	_____	_____	a high school student (16-18)
_____	_____	_____	a husband/wife couple
_____	_____	_____	a Big who already has one Little
_____	_____	_____	a Big Sister for my son instead of a Big Brother
_____	_____	_____	a person who is homosexual (involved with same-sex persons)
_____	_____	_____	a person who is bi-sexual (involved with persons of both sexes)
_____	_____	_____	a person who has children
_____	_____	_____	a person of another race
_____	_____	_____	a person of another religion
_____	_____	_____	a person who smokes
_____	_____	_____	a person who owns firearms
_____	_____	_____	a person with pets

Please list any other comments you might have about the type of person you wish your child to be matched with. If you have any specific request for a particular type of volunteer not covered in the list above, either characteristics that you prefer, or ones that you will not accept, please list them here.

Thank You!



Check the Activities Your Child Likes or Dislikes

LIKES	ACTIVITY	DISLIKES	UNKNOWN	Add any interests not listed
_____	Photography	_____	_____	_____
_____	Swimming	_____	_____	_____
_____	Fishing	_____	_____	_____
_____	Baseball	_____	_____	_____
_____	Basketball	_____	_____	_____
_____	Football	_____	_____	_____
_____	Soccer	_____	_____	_____
_____	Boating	_____	_____	_____
_____	Music	_____	_____	_____
_____	Art	_____	_____	_____
_____	Camping	_____	_____	_____
_____	Animals & Pets	_____	_____	_____
_____	Gardening	_____	_____	_____
_____	Working with Tools	_____	_____	_____
_____	Reading	_____	_____	<div style="border: 2px solid black; padding: 10px; text-align: center;">small picture of child</div>
_____	Science	_____	_____	
_____	Collecting Things	_____	_____	
_____	Likes to Talk	_____	_____	
_____	Hiking	_____	_____	
_____	Cars	_____	_____	
_____	Bicycle	_____	_____	
_____	Puzzles	_____	_____	
_____	Board Games	_____	_____	
_____	Skating	_____	_____	
_____	Skiing	_____	_____	
_____	Sledding	_____	_____	
_____	Kite Flying	_____	_____	
_____	Horseback Riding	_____	_____	
_____	Golf	_____	_____	
_____	Boxing	_____	_____	
_____	Video Games	_____	_____	
_____	Hunting	_____	_____	
_____	Parties	_____	_____	
_____	Archery	_____	_____	
_____	Bowling	_____	_____	
_____	Pool	_____	_____	
_____	Dancing	_____	_____	
_____	Younger Playmates	_____	_____	
_____	Older Playmates	_____	_____	
_____	School Work	_____	_____	
_____	Paper Route	_____	_____	
_____	Odd Jobs	_____	_____	
_____	Helps Parent	_____	_____	
_____	Movies	_____	_____	



Child Autobiography

Note to Parents: Please do not complete past page 9 without your child. This section is intended to give us background into your child's perspective. If the child is of age please allow them to complete this section unassisted. If not, please ask your child each question and record the answers as you hear them. It is not in our interest to pass judgement on what was recorded however, it is in our interest to learn how your child perceives himself/herself in the world around him/her. If this is difficult to do please leave blank, and the Case manager will be more than happy to assist him/her in completing this questionnaire. Thank you.

A special note to: _____

Your parent/guardian has asked us to find a friend for you. We call this person a Big Brother or Big Sister. Your Big is someone you can talk to. They are someone who would share your interests and help you to develop new ones.

Your Big will spend time with you. The only thing they want in return is your friendship. We know that it is very hard to think about being friends with someone you don't know, but if you have decided that you would like to have a Big Brother or Sister, please answer the questions on the following pages.

Name: _____

School: _____

Teacher: _____

Age: _____

Grade: _____

Current Photo





Big Brothers Big Sisters Of Racine and Kenosha Counties

-
1. Would you like to have a Big Brother/Sister? Yes_____ No_____ Not Sure_____
 2. Whose idea was it for you to have a Big Brother/Big Sister? _____
 3. What do you think a Big Brother/Big Sister is?

 4. Why would you like to have a Big Brother/Big Sister?

 5. If you got a Big Brother/Big Sister, what would he/she be like?

 6. What kinds of things would you like to do with a Big Brother/Sister?

 7. What kinds of things would you not like to do?

 8. Are you a happy or unhappy person?

 9. How do you and your mother get along?

 10. How do you and your brother(s) and/or sister(s) get along?

 11. What are you good at?



Big Brothers Big Sisters Of Racine and Kenosha Counties

12. What is difficult for you?

13. What do you like most about your best friend?

14. Who are your close friend(s) at school or in your neighborhood?

15. What do you like to do with your friend(s)?

16. Do you like school? _____ Why or why not?

17. What about you should we tell a person interested in being your Big Brother/Big Sister?

18. What do you want to be when you grow up?

19. What responsibilities do you have around the house?

20. If you could have three wishes, what would they be?



Complete these sentences. Please do not skip any of them. Be sure to make a complete sentence.

1. My school _____
2. I am proud of _____
3. I like _____
4. My dreams _____
5. My mother _____
6. My brother(s) _____
7. My sister(s) _____
8. I am sorry _____
9. My father _____
10. It makes me angry _____
11. People talk about my _____
12. A good friend is _____
13. Other kids my age _____
14. Boys _____
15. Girls _____
16. I worry about _____
17. My mother treats me _____
18. I am happiest when _____
19. I hope _____
20. Policemen _____
21. Sometimes people _____
22. Black _____
23. White _____
24. Mud _____

On the back of this paper, draw a picture of you and your Big Brother/Big Sister. Make the best picture you can. Take your time and work carefully. Try hard to see what a good picture you can make.