

**ALL FORMS IN THIS PACKET
MUST BE COMPLETED,
SIGNED AND
RETURNED BY MAIL TO:**

**Big Brothers Big Sisters NEO
8 North State Street
Suite 360
Painesville, Ohio 44077**

**www.bbbsneo.org
(440) 352-2526**

VOLUNTEER PRE-ENROLLMENT APPLICATION

Note: Volunteers are not required to submit a formal application prior to the in-person interview. Rather, they provide certain identifying and demographic information, list references, and give consent for the agency to conduct a criminal background check. The information to be collected as represented on this form may be collected through a variety of means, e.g., separate criminal background consent form, directly entering volunteer demographic data into a database, etc. Also, if previously involved with another BBBS organization or youth organization, these will be contacted to verify individual's involvement.

First Name:	Middle Name:	Last Name:	Date of Birth:	
Home Address:		City:	County:	State: Zip:
Email:	Home Ph #:	Work Ph #:	FAX:	
Male Female	Social Security #:	Employer:		
Address:		City:	State:	Zip:
Occupation:		Ethnicity:		
Can We Contact You At Work? ____ Yes ____ No	Work Hours:	How Long Employed:		
Possession of a driver's license is not a requirement to participate in any of our programs but is required if you will be transporting a youth in any vehicle you are operating.				
Do you have a driver's license? ____ Yes ____ No	If yes, state of issue and #	Expiration date:		

REFERENCES

Please type or print information requested for three references: 1) your current or past employer who has known you for at least 1 year; 2) a co-worker or friend who has known you for at least 2 years; and 3) a close family member (spouse/domestic partner) or a second friend who has known you for at least 3 years.

1. Employer's Name (or school if student):		Supervisor's Name (or teacher if a student):		
Address:		City:	State:	Zip:
Day Phone #:	Fax #:	Email:		
2. Coworker or Friend:				
Address:		City:	State:	Zip:
Day Phone #:	Fax #:	Email:		
3. Spouse/Domestic Partner/Friend:				
Address:		City:	State:	Zip:
Day Phone #:	Fax #:	Email:		
Have you ever applied before (or have been) to be a Big Brother or Big Sister? Yes No			Where and When:	
What, if any, other youth organizations have you worked for or been involved with as a volunteer?				

VOLUNTEER PRE-ENROLLMENT APPLICATION (Continued)

I understand that:

The references I listed may be contacted by mail, telephone, or email;

I am in no way obligated to perform any volunteer services;

The information I provided may be used to conduct a background check, to include driving recordcheck, criminal background check, and other records where required by local, state, or federal law for volunteers working with youth;

The BBBS agency is not obligated to match you with a youth; and, as part of our enrollment processes, we will be asking you to provide additional personal information prior to making any recommendations for assignment.

Signature

Date

Return Mail to:

Big Brothers Big Sisters of Northeast Ohio
8 North State Street, Suite 360
Painesville, OH 44077

www.bbbsneo.org

440-352-2526

VOLUNTEER PRE-INTERVIEW QUESTIONNAIRE

Prior to your in-person interview, we would like you to answer the questions below. Parents of youth in our programs will often ask us questions about someone with whom their child will be matched. We will only release information to a parent with your expressed permission. The information you give will also help us make a better match for you and assure we can support you during your involvement with our programs.

NOTE

This form can be completed by the volunteer prior to the in-person interview. It provides information that can be used to assess the volunteer and determine with whom the volunteer might be matched. It is also possible to add these questions to the in-person interview if the interview is not in the agency and the volunteer does not have 'waiting time' before the interview to complete it. Also, any demographic information about the volunteer not captured elsewhere can be included on this form.

Your Name: _____ Date: _____

1. Would you describe yourself as a person who enjoys:

Watching events or activities _____ Actively participating in activities _____ Both _____

2. Are you experiencing any physical or mental health problems?

Yes _____ No _____

If Yes, please explain:

3. Have you ever been arrested, charged, or convicted of a crime?

Yes _____ No _____

If Yes, please provide a description:

4. How long have you lived in the area? _____

5. Do you anticipate any significant life changes over the next year or have you had any in the past year?

If so, please explain.

6. Do you speak any foreign languages? Yes _____ No _____

7. Which do you enjoy more?

Indoor Activities _____ Outdoor Activities _____ Both _____

VOLUNTEER PRE-INTERVIEW QUESTIONNAIRE (Continued)

8. Do you have any guns or ammunition in your House?

Yes _____ No _____

If yes, please describe the safety precautions in place to protect children (e.g., gun safe).

9. Would you be able to secure or otherwise make unavailable any youth inappropriate viewing materials in your home? This would include television channels and Internet access?

Yes _____ No _____

(If not, we will have you discuss during the in-person interview)

10. Do you have any pets that could potentially scratch or bite a child?

Yes _____ No _____

If Yes, indicate the type of pet(s) and indicate any history of aggression (biting, etc.).

11. Have you had any driving citations and/or moving violations in the past 5 years?

Yes _____ No _____

If Yes, please provide a description:

12. Would you be willing to work with a child who has experienced?

Physical _____ Emotional _____ Sexual abuse _____

13. Marital Status/Live In? _____

14. Education level? _____

15. Are you experiencing any medical problems/issues that could affect a match and of which we need to be aware?

Yes _____ NO _____ (If Yes, we will have you discuss during the in-person interview)

Are you taking any medications? What? _____

16. At this time, is there anything else you'd like to tell us about yourself?

Signature

Date

First Select

Employee Screening

NOTICE AND ACKNOWLEDGMENT

NOTICE REGARDING BACKGROUND INVESTIGATION

Big Brothers Big Sisters of Northeast Ohio may obtain information about you from a consumer reporting agency for employment purposes. Thus, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include information about your character, general reputation, personal characteristics, driving record, and/or mode of living, and which can involve personal interviews with sources such as your current and past employers, friends, or associates. These reports may be obtained at any time after receipt of your authorization and, if you are hired, throughout your employment. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for employment is an investigation into your education and/or employment history conducted by **First Select Employee Screening 7139 Hopkins Rd. Mentor Ohio 44060 1-877-364-9038**. The scope of this notice and authorization is all-encompassing, however, allowing **Brothers Big Sisters of Northeast Ohio** to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and, if you are hired, throughout the course of your employment to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" at any time after receipt of this authorization and, if I am hired, throughout my employment. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by **First Select Employee Screening**, another outside organization acting on behalf of **Brothers Big Sisters of Northeast Ohio** itself. I agree that a facsimile ("fax") or photographic copy of this Authorization shall be as valid as the original.

California Minnesota, and Oklahoma applicants or employees only: By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. Please check this box if you would like to receive a copy of an investigative consumer report or consumer credit report if one is obtained by the Company at no charge whenever you have a right to receive such a copy under California law.

The following is for identification purposes only to perform the background check and will not be used for any other purpose:

DATE PRINT NAME

SIGNATURE OF EMPLOYEE OR PROSPECTIVE EMPLOYEE

SOCIAL SECURITY NUMBER

Date of Birth (For Background Purposes Only)

Drivers License Number State

Current Address:

Previous Addresses (Last 7 years):

Any other names I have been known by (including maiden name):

7139 Hopkins Road Mentor, Ohio 44060

Office: 440-255-3673 Fax: (440) 255-3630