



**BIG BROTHERS BIG SISTERS**  
(Calgary and Area)

**TEEN MENTOR APPLICATION PACKAGE**


Dear Applicant,

We are pleased that you're applying to be a Big Brother or Big Sister in the Teen Mentoring Program! To start your application, please follow these 3 steps:

**STEP 1 SUBMIT YOUR APPLICATION ONLINE AT [BBBSCALGARY.CA](http://BBBSCALGARY.CA)**

*Collect the contact information for three references (18+ who have known you for at least 2 years)*

- ✓ *A teacher or school 'counselor*
- ✓ *A family member {parent, aunt, uncle, grandparent, etc.}*
- ✓ *A character reference (friend of the family, spiritual advisor, coach, someone you've worked or babysat for, another teacher, etc.)*

1. From the main menu, click **Volunteer**
2. Scroll down the page to click the large purple button 
3. Fill in the application and submit it. *If you run into any issues, call 403-681-5714*

**STEP 2 OBTAIN SIGNATURES** (in blue or black pen) from yourself and your parent/legal guardian on the following forms

- ✓ Volunteer Permission and Release
- ✓ Offence Declaration
- ✓ Confidentiality Agreement
- ✓ Media Consent Form – Teen Mentor

**STEP 3 RETURN THE (4) COMPETED FORMS**

Return your forms to your BBBS contact, or your teacher, to be added to your Volunteer File. If you have any questions, contact BBBS at 403-681-5714.

***We Must Receive Both The Online Application  
And The Signed Forms To Proceed With Your Application***

**THANK YOU FOR YOUR INTEREST IN BECOMING A TEEN MENTOR!**



**BIG BROTHERS BIG SISTERS**  
(Calgary and Area)

**VOLUNTEER PERMISSION and RELEASE AGREEMENT**

**TO: BIG BROTHERS BIG SISTERS OF CALGARY AND AREA (THE "AGENCY")**

The Agency and Big Brothers Big Sisters Canada ("**BBBSC**") are separate entities and this Agreement is between me and the Agency.

1. By applying to volunteer with the Agency ("Volunteer Application") and signing this Agreement, I **ACKNOWLEDGE, UNDERSTAND AND ACCEPT** that:
  - a) I am a legal resident of Canada and have reached the age of majority in the province or territory in which I reside. I acknowledge and agree that if I have not reached the age of majority of the province or territory in which I reside, my parent or legal guardian will also need to sign this Agreement in order for my Volunteer Application to be considered;
  - b) There is no obligation on the Agency to accept my Volunteer Application or assign me as a volunteer into a mentoring program (a "**Mentoring Program**") and the Agency may terminate my involvement in a Mentoring Program in its sole discretion and without reason;
  - c) If I am accepted as a volunteer, my involvement in a Mentoring Program is not intended to create and shall not be construed as creating either an employee-employer relationship or a contract for services that would allow me to receive a salary, compensation, payment or any benefits, monetary or otherwise; and
  - d) If I am accepted into a Mentoring Program, I understand that I will be required to enter into a confidentiality agreement with the Agency, and I agree to abide by the volunteer position description(s) and code(s) of conduct established by the Agency, including any applicable guidelines, Standards and policies.

2. **ASSUMPTION OF RISK, RELEASE AND REIMBURSEMENT**

I acknowledge, understand and accept that:

- a) I am responsible for all risks associated with my involvement in a Mentoring Program including, without limitation, the risk of bodily or psychological harm or injury.
- b) Subject to local laws, I agree not to sue the Agency, BBBSC and/or any of their member agencies in respect of any such injury or claim resulting from my participation in a Mentoring Program, my Volunteer Application, the acceptance or denial of my Volunteer Application, the Alumni Program and/or my association with the Agency or BBBSC.
- c) I understand that I am fully responsible for any damage to my personal vehicle and/or property during my volunteer involvement in a Mentoring Program and that neither BBBSC nor the Agency insures personal vehicles or property belonging to its volunteers;
- d) I agree to reimburse the Agency and/or BBBSC and/or any of their member agencies for any damages or losses of any kind (including but not limited to the injury of any other person and/or damage to or loss of property) that may arise in connection with my negligence, wilful misconduct, or failure to act in accordance with published BBSC policies and guidelines and relating to or arising in connection with my participation in a Mentoring Program or my association with the Agency or BBSC, including payment of any and all legal expenses of the Agency, BBBSC and/or any of their member agencies.

3. **BACKGROUND CHECK.** I understand that my acceptance into the Mentoring Program will be conditional on my successful completion of a background check, which may include contacting the references included in my Volunteer Application and/or a criminal record check, for the purposes of confirming my suitability for the Mentoring Program. I agree to provide all necessary consents for such checks.
4. **PRIVACY NOTICE.** The personal information provided by me or otherwise collected by the Agency in connection with my application, will be used by the Agency for the purpose of evaluating and considering my Volunteer Application and, if accepted into a Mentoring Program, for the purpose of administering the Mentoring Program. This information may include my name, phone number, mailing address, date of birth, results of background check, driver's license, and auto insurance information. My personal information will be maintained by the Agency on a confidential basis and will only be disclosed to the parent(s) and/or guardian(s) of a child with whom the Agency may consider "matching" me in a Mentoring Program, to representatives of a school or institution in connection with my participation in a site-based Mentoring Program, to the BBBSC as required for the purposes of accreditation reviews, or legal proceedings and as otherwise required or permitted by law. In the event the Agency ceases operations, any and all information about me held by the Agency will be provided to BBBSC, another BBBSC-selected agency, or both, and will be used for the purposes set out above.
5. **Other Terms of this Agreement.**
  - a) In entering into this Agreement, I am not relying on any oral or written representations other than as set forth in this Agreement.
  - b) This Agreement shall be governed by and construed pursuant to the laws of the Province or Territory in which the Agency is located.
  - c) In the event that any provision or term of this Agreement is held to be invalid, illegal or unenforceable, the remaining provisions of this Agreement shall remain in full force and effect.
6. **Media Consent.** Any photographs or video productions taken of volunteers by agency staff at recreational events or match outings, or otherwise authorized by the Executive Director or Board of Directors, may be used by the agency for purposes of promotional material including brochures posters, newsletters, media information, advertisements, audio-visual productions and web pages, such as the Agency website and social media. Photographs or video productions may also be shared with community and school partners and Big Brothers Big Sisters of Canada for program promotion.

If you do not agree with item #6 *Media Consent*, please check here

**IMPORTANT:** I acknowledge that I have read the terms of this Agreement, have been given an opportunity to obtain independent legal advice, and understand that it represents a waiver of certain of my legal rights, including my right to sue (subject to local laws). I further agree that such limits are reasonable and sign this Agreement freely, voluntarily and without duress.

Applicant Name (Print)	Applicant Signature	Date (MM   DD   YYYY)
Parent/Legal Guardian Name (Print)	Parent/Legal Guardian Signature	Date (MM   DD   YYYY)



### OFFENCE DECLARATION FORM

I **DECLARE**, since the last Criminal Records Check<sup>1</sup> provided to Big Brothers Big Sisters of Calgary and Area (the "Agency"), or since the last Offence Declaration Form submitted to the Agency, that:

- I have **no** convictions under the Criminal Code of Canada up to and including the date of this declaration for which a pardon has not been issued or granted under the Criminal Records Act (Canada).
- I have **no** pardons related to sexually based offences up to and including the date of this declaration under the Criminal Records Act (Canada).
- I have **no** charges pending under the Criminal Code of Canada up to and including the date of this declaration.
- I have **not** been the subject of any criminal investigation or allegation, any child welfare investigation or allegation, nor have I had any charges brought against me, even if the charges are pending.

My driver's license has **not** been suspended or restricted for any reason.

PLEASE CHECK THE APPROPRIATE LINE

- There have been no occurrences as described above since my last Criminal Record Check or Offence Declaration Form.

**OR**

- All reportable matters as described above were discussed with Agency Service Delivery Staff and/or the Executive Director at the time of the occurrence(s).

[1] Hereby attest that the information disclosed herein is true, complete and accurate to the best of my knowledge and belief. I understand that failure to complete an accurate and truthful Offence Declaration will lead to a review of my continued service with Big Brothers Big Sisters of Calgary and Area.

Applicant Name (Print)	Applicant Signature	Date (MM   DD   YYYY)
Parent/Legal Guardian Name (Print)	Parent/Legal Guardian Signature	Date (MM   DD   YYYY)

[1] Includes a Vulnerable Sector check for those who are in a position of trust.



**MEDIA CONSENT FORM – TEEN MENTOR**

Re: \_\_\_\_\_  
(Please Print Name)

Any photographs or audio/video recordings taken of myself by *Big Brothers Big Sisters of Calgary and Area* (the 'Agency') staff or invited media personnel at recreational events, match outings, or other Agency sanctioned events authorized by the President & CEO or Board of Directors, may be used by the Agency for purposes of promotional material including brochures, posters, newsletters, advertisements, media information, audio-visual productions and web pages, such as the Agency website and social media. Photographs or audio/video productions may also be shared with community and school partners for program promotion.

I further waive any claim which I may have against the Agency arising from the use of such photographs or audio/video recordings, as aforesaid.

This consent and waiver shall remain in effect for the duration of my involvement with Big Brothers Big Sisters of Calgary and Area unless otherwise revoked.

I hereby give consent:

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date (MM | DD | YYYY)

\_\_\_\_\_  
Parent/Guardian Signature  
(If Required)

\_\_\_\_\_  
Date (MM | DD | YYYY)

**CONFIDENTIALITY CONCERN RE: MEDIA CONSENT**

If you **DO NOT WANT** your/your youth's photograph or audio/video recording used due to a safety concern, please check here and complete the following:

Name of Applicant (Please Print) \_\_\_\_\_

Signature of Parent/Legal Guardian \_\_\_\_\_

Date (MM | DD | YYYY) \_\_\_\_\_

IT IS THE VOLUNTEER'S RESPONSIBILITY  
TO NOTIFY THE AGENCY IF THE STATUS OF THIS CONSENT CHANGES



### Family Reference

Provided for:  Provided by:   
Telephone:  Email:

Big Brothers Big Sisters is an organization that enrolls volunteer mentors to provide a healthy role model to children and youth in our community. Volunteer mentors must provide a stable, positive influence over the period of their commitment, which is usually a school or calendar year. Many of the resilient children and youth in our programs have experienced challenges in their lives; relying on the consistent presence of a mentor makes a difference in their lives, likewise ending this important relationship sooner than expected can have a detrimental effect on the young person. Help us Start Something for our community's youth by providing a reference that, to the best of your knowledge, is an honest reflection of the applicant and their ability to be a positive influence in the life of a child.

Your responses will remain confidential. Thank you.

1. How long have you known the applicant and in what capacity?

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2. Did you know the applicant was applying to be a mentor?  Yes  No  
If so, what was your reaction?

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3. What personal strengths do you feel the applicant has to offer?

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4. Based on your knowledge of who the applicant has in his/her life, to whom would he/she be most likely to turn, or be most responsive to for support/guidance?

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5. Can you tell me about the applicant's community involvement and personal interests?

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*Family Reference (Con't)*

6. Can the applicant be counted on to follow through on the commitments that he/she undertakes?  Yes  No Please explain.

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7. When have you witnessed the applicant interacting with children? How does the applicant interact with or relate to children?

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8. Have you ever known the applicant to be inappropriate (emotionally, physically, verbally, sexually) with either adults or children?  Yes  No Please explain.

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9. To your knowledge, has the applicant ever had any trouble following rules?  Yes  No If so, what kind of rules?

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10. Is there anything that you are aware of that may interfere with the applicant's ability to mentor or that would cause their commitment to our organization to come to an end?  Yes  No Please explain:

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Family Reference (Con't)

11. Has the applicant experienced an addiction, health, or emotional concern that may impact his/her ability to participate actively in a match?  Yes  No Please explain:

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12. Would anything need to change in the applicant's home environment to be suitable for a child's visit?  Yes  No If so, what?

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13. Would you allow the applicant to develop a one-to-one relationship with your child or a child you care about?  Yes  No If not, why not?

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14. Would you recommend the applicant as a child or youth mentor?  Yes  No

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15. Is there anything you would like to add that would aid us in our decision?

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Signature of Referee/Mentoring Coordinator  
*Mentoring Coordinator to sign, if reference taken by phone*

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Date





### Personal Reference

Provided for:  Provided by:   
Telephone:  Email:

Big Brothers Big Sisters is an organization that enrolls volunteer mentors to provide a healthy role model to children and youth in our community. Volunteer mentors must provide a stable, positive influence over the period of their commitment, which is usually a school or calendar year. Many of the resilient children and youth in our programs have experienced challenges in their lives; relying on the consistent presence of a mentor makes a difference in their lives, likewise ending this important relationship sooner than expected can have a detrimental effect on the young person. Help us Start Something for our community's youth by providing a reference that, to the best of your knowledge, is an honest reflection of the applicant and their ability to be a positive influence in the life of a child.

Your responses will remain confidential. Thank you.

1. How long have you known the applicant and in what capacity?  

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2. Did you know the applicant was applying to be a mentor?  Yes  No  
If so, what was your reaction?  

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3. What is it like to have the applicant as a friend?  

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4. What personal strengths do you feel the applicant has to offer?  

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5. Based on your knowledge of who the applicant has in his/her life, to whom would he/she be most likely to turn, or be most responsive to, for support or guidance?  

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6. Can you tell me about the applicant's community involvement and personal interests?

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7. Can the applicant be counted on to follow through on the commitments he/she undertakes?  Yes  No Please explain.

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8. When have you witnessed the applicant interacting with children? How does the applicant interact with or relate to children?

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9. Have you ever known the applicant to be inappropriate (emotionally, physically, verbally, sexually) with either adults or children?  Yes  No If so, explain.

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10. To your knowledge, has the applicant ever had any trouble following rules?  Yes  No If so, what kind of rules?

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*Personal Reference (Con't)*

11. Is there anything that you are aware of that may interfere with the applicant's ability to mentor or that would cause their commitment to our organization to come to an end?  Yes  No

12. Has the applicant experienced an addiction, health or emotional concern that may impact his/her ability to participate actively in a match?  Yes  No

13. Would anything need to change in the applicant's home environment to be suitable for a child's visit?  Yes  No If so, why?

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14. Would you allow the applicant to develop a one-to-one relationship with your child or a child you care about?  Yes  No If not, why not?

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15. Would you recommend the applicant as a child or youth mentor?  Yes  No

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16. Is there anything you would like to add that would aid us in our decision?

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Signature of Referee/Mentoring Coordinator  
*Mentoring Coordinator to sign, if reference taken by phone*

Date



### Teacher Reference

Provided for  Provided by   
Telephone  Email

Big Brothers Big Sisters is an organization that enrolls volunteer mentors to provide a healthy role model to children and youth in our community. Volunteer mentors must provide a stable, positive influence over the period of their commitment, which is usually a school or calendar year. Many of the resilient children and youth in our programs have experienced challenges in their lives; relying on the consistent presence of a mentor makes a difference in their lives, likewise ending this important relationship sooner than expected can have a detrimental effect on the young person. Help us Start Something for our community's youth by providing a reference that, to the best of your knowledge, is an honest reflection of the applicant and their ability to be a positive influence in the life of a child.  
Your responses will remain confidential. Thank you.

17. How long have you known the applicant and in what capacity?

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18. Did you know the applicant was applying to be a mentor?  Yes  No  
If so, what was your reaction?

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19. What personal strengths do you feel the applicant has to offer?

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20. Can the applicant be counted on to follow through on the commitments he/she undertakes?  Yes  No Please explain.

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21. To your knowledge, has the applicant ever had any trouble following rules?  
 Yes  No If so, what kind of rules?

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22. Would you recommend the applicant as a child or youth mentor?  Yes  No

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23. Is there anything you would like to add that would aid us in our decision?

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24. Please rate the student on the following characteristics. Please provide a brief explanation if your answer reflects a “somewhat good,” “poor,” or “extremely poor” rating.

	Extremely Good	Very Good	Somewhat Good	Poor	Extremely Poor	Comments
Flexibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ability to Accept feedback	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ability to manage time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ability to Get along w/ others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Attentive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ability to be on time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ability to work unsupervised	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Signature of Referee/Mentoring Coordinator Date  
*Mentoring Coordinator to sign, if reference taken by phone*