

BIG BROTHERS BIG SISTERS OF BUTLER COUNTY
A Program of the Butler County Family YMCA
~Big Brother or Big Sister Application~

NAME: _____
First Middle Last Nickname

MAIDEN NAME: _____
Social Security Number

CURRENT ADDRESS: _____

PHONE: () _____ (H) () _____ (W)

CAN YOU BE CONTACTED AT WORK? Yes No

EMAIL: _____

MARITAL STATUS: Single Married Divorced

DATE OF BIRTH: _____

GENDER: Male Female

REFERENCES: Please list your *current supervisor first* using his/her work address and phone number. The remainder of the references should be from individuals who have known you for at least 2 years. Do not include any relatives. If you are a traditional, full-time college student or a high school student, please include a professor or teacher as one of your references (the 2-year minimum may or may not apply). **We mail forms to these people, so please provide complete addresses.**

	<u>Name</u>	<u>Address</u>	<u>Phone</u>	<u>Relationship</u>
1.	_____	_____	_____	current supervisor

2.	_____	_____	_____	

3.	_____	_____	_____	

4.	_____	_____	_____	

STATEMENT OF PROGRAM PHILOSOPHY AND VOLUNTEER POLICY

Big Brothers Big Sisters of Butler County, a program of the Butler County Family YMCA, is a social service program designed to match children with volunteers who serve as positive adult role models. While the program is an interfaith and interracial one, the desires of the child's parent(s) or guardian(s) are respected in the selection of the appropriate adult for each child.

The intake process is designed to establish a profile of you and your interests. This profile will be used by the BBBS Case Manager to best match you with a child. All elements of your profile will be kept in the strictest confidence except for when you are being considered for a match with a child, at which time the Case Manager will discuss your profile with the child's parent(s) or legal guardian(s).

Of course, prior to your assignment to a child, a similar profile of that child and his or her family will be discussed with you to insure that your desires have been respected.

During the discussion of both profiles, pertinent information will be exchanged while the names of the parties described shall be held confidential. Any party has the right to refuse to enter into the match based on the information communicated at this time.

The undersigned:

1. has read and fully understands the statement above;
2. grants permission for Big Brothers Big Sisters of Butler County to share any and all information acquired during the intake process with the parent(s) or legal guardian(s) of a child who is actively being considered for a match with the undersigned; and
3. acknowledges and agrees that he or she is not obligated, if called upon, to perform the volunteer services herein applied for nor is the agency obligated to assign or actively seek to assign the applicant to a child.

The information that I have provided above is correct.

Signature of Applicant

Date

Please send your completed form to:

Taylor Gall
Big Brothers Big Sisters of Butler County
339 N. Washington Street
Butler, PA 16001

Fax: 724-287-1007
Email: tgall@bcfymca.org