

## **Volunteer Application Form**

Thank you for your interest in volunteering with Boys & Girls Club Big Brothers Big Sisters of Edmonton & Area. Through this application, we will be asking you to provide basic personal, demographic and contact information. Our agency uses information gathered in a professional manner, information will be kept confidential based on our agency policy.

Prior to starting the application, please take a moment to gather emails and phone contact information for your references. There are 3 types of references that are required, they are as follows;

**1.**Significant Other/Partner or Family Reference.

**2.**Supervisor Reference (Volunteer or Employment). If you have volunteered/worked within the vulnerable sector please provide your supervisor/lead for that work.

**3**.Personal/Friend Reference. Must have known you for minimum two years.

We also encourage you to review our Volunteer Programs and the Application Process on our website: bgcbigs.ca

You can submit this form to welcome@bgcbigs.ca, mail or drop off at our Riverdale office (10135 89 St Edmonton, AB T5H-1P6).

If you have questions about this application form, please call our main office at 780-424-8181

Boys & Girls Clubs Big Brothers Big Sisters of Edmonton and Area embodies the principles of diversity and welcomes participation of all regardless of race, religion, culture or sexual orientation. Our agency works to create a safe, respectful and inclusive environment for all who are involved with our programs.

### Personal Information:

First (preferred) Name\_\_\_\_\_\_

Legal/Other First Name: \_\_\_\_\_\_

Last Name\_\_\_\_\_

Date of Birth \_\_\_\_\_/\_\_\_\_ (MM/DD/YYYY)

Gender: \_\_\_\_\_

Pronouns: She/Her/Hers He/Him/His They/Them/Theirs Ey/Em/Eirs Vey/Ver/Vis Xe/Xem/Xers Zie/Hir/Hirs Not Listed - Please Specify (Circle one)

Pronouns Not Listed – Please Specify \_\_\_\_\_



Address:					
City:	Pro	ovince:			
Postal Code:					
Home Phone ()	Cell Ph	one ()			
Work Phone ()	ext	-			
E-mail Address					
Emergency Contact:					
Emergency Contact Relation	nship:				
Phone #:()					
Please specify the culture/ethnicity you identify most with:					
□ African	American	$\Box$ Asian – all other			
$\Box$ Central American	English Canadian	□European			
□ First Nations	French Canadian	🗆 Indo China			
🗆 Inuit		Middle East			
$\Box$ Pacific Island	$\Box$ South American	□Southeast Asian			
□ Undisclosed					
Language(s) spoken:					
Were you born in Canada?	Y N				



**Program Location**: I reside in the following community (please circle one):

-Edmonton -Parkland -Camrose -Strathcona -Vegreville -Morinville -Lac La Biche -Cold Lake

### In which program are you interested in volunteering?

Community Based:	Site Based:
□ Big Brothers	□ In School Mentoring - Adult or Teen
□ Big Sisters	□ Corporate Mentoring
□ Big Siblings	Club Programs
Couple Match	
□ Youth in Care	HEROES Hockey
	Game Changers
	□Support/Agency Volunteer

If you are applying along with others as part of a group or corporate, please state the group here:

### **Employment Information**

Are you currently employed?	Υ 🗆	Ν 🗆
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If Yes, Indicate Name of Current Employer: \_\_\_\_\_

# **Volunteer Information**

Have you ever volunteered with any other child/you	th serving program, including Boys and Girls Clubs or Big Brothers
Big Sisters – here or in another community? Y $\Box$	N 🗆
If yes, please provide agency name and dates:	

January 2024



Education: Please indicate your highest level of completed education.				
□ High School	□ Vocational Training			
□ Some Post Secondary	□ University Degree			
College Diploma	□Masters			
PhD				
Are you currently attending School?	Y 🗆 N 🗆 If yes, whe	ere?		
Course of Study:				
What prompted you to apply? (Select only one option)				
□ Newspaper/Written Word		□Radio		
Brochure		$\Box$ Special Event		
Classroom Announcement/Presentation		□ Television		
□ Business/Corporate		$\Box$ social media		
I was a Little Brother/ Sister or Club member		□Word of Mouth/Invitation		
Information Booth		□Other		



As part of the application process, we require 3 specific types of references. The below will walk you through the best fit for each type of reference. If you feel you do not have a type of reference that is required please leave the fields blank and one of our staff will support you in determining the best fit.

Once you have submitted your application, emails/texts with instructions on how to complete the references will be sent to your referees.

Please encourage your references to check their email (including the junk mail folder) for the reference email.

### **Reference One:**

If you have someone you view currently as a significant part of your life, then we want to have them complete a reference on your behalf.

•This could mean that you are dating, living together, common law or married.

Please complete a Family Member Reference if you do not currently have a significant other.

Significant Other (Dating, common law or married for 2 years)

**Family Member** (known for **10 years,** ex. Parent, Aunt, Uncle, Sibling, Cousin)

Name	 
Phone #1: ()Alternate phone #: ()	
Work #: ()	
E-mail (strongly recommended):	
Relationship to you	
How long have you known this person?	



Reference Two:									
Personal/Character	Reference –	*This	reference	is	required	for	all	volunteer	applicants.
This person must kno with. This <u>cannot be</u> worker, Family frienc	a family membe		-				-		
Personal Reference N	lame								
Phone #1: ()	β	lternat	e phone #: (_	)				-	
Work #: ()									
E-mail (strongly recor	mmended):								
Relationship to you_									
How long have you k	nown this perso	n?							

# **Reference Three:**

#### Supervisor/Lead Reference

**Please provide ONE** of the below references. This is required from someone who has played a supervisory or lead role in your life. Below is a list in order of preference:

• **Current Employer or Volunteer Work:** If you have worked or volunteered within the vulnerable sector (children, youth, seniors, individuals with disabilities etc) in the last 5 years, please provide your supervisor or lead information to complete a reference on your behalf. If you have not worked or volunteered within the vulnerable sector in the past 5 years please provide your current employer reference or a volunteer reference.

□ Volunteer/ □	Employer	/ 🗆 Teacher/	🗌 Coach 🤇	known for 1	vear)

Name		-
Phone #1: ()	_Alternate phone #: (	)

Work #: (\_\_\_\_\_) \_\_\_\_\_

January 2024



E-mail (strongly recommended): \_\_\_\_\_

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

How long have you known this person? \_\_\_\_\_

### **Consent and Acknowledgement**

In connection with my application to volunteer with Boys and Girls Clubs Big Brothers Big Sisters of Edmonton, I acknowledge that for the purposes of considering my Volunteer Application, I consent to the Agency:

- Contacting the references, in confidence, included in my Volunteer Application;
- Conducting a police information check and other relevant background checks;
- Collecting information from any Big Brothers Big Sisters agency with which I am, or was formerly involved, including a Big Brothers Big Sisters agency in another country with which I am, or was formerly involved AND
- Collecting and using the personal information I have provided for the purpose of evaluating and considering my Volunteer Application and from this point forward the information that I have provided will be retained for that purpose.

I agree that the information I have provided is true to the best of my knowledge. I authorize Boys & Girls Clubs Big Brothers Big Sisters of Edmonton & Area to use the information I provided within their agency. \*



# VOLUNTEER PERMISSION AND RELEASE AGREEMENT

## Boys and Girls Clubs Big Brothers Big Sisters of Edmonton & Area (BGCBigs)

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

- 1. By applying to volunteer with the Boys and Girls Clubs Big Brothers Big Sisters of Edmonton & Area Society (the Agency) 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.
  - b) There is no obligation on the Agency to accept my Volunteer Application or assign me as a volunteer with the Agency may terminate my involvement at its sole discretion and without reason;
  - c) If I am accepted as a volunteer, my involvement with the Agency 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 with the Agency, 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 the Agency 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/BGCC and/or any of their member agencies in respect of any such injury or claim resulting from my participation in an Agency Program, my Volunteer Application, the acceptance or denial of my Volunteer Application, the Alumni Program and/or my association with the Agency or BBBSC/BGCC.
- c) I understand that I am fully responsible for any damage to my personal vehicle and/or property during my volunteer involvement and that neither BBBSC/BGCC nor the Agency insures personal vehicles or property belonging to its volunteers;
- d) I agree to reimburse the Agency and/or BBBSC/BGCC 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 gross negligence, willful misconduct, or failure to act in accordance with published BBBSC/BGCC policies and guidelines and relating to or arising in connection with my participation in the Agency or my association with the Agency or BBBSC/BGCC, including payment of any and all legal expenses of the Agency, BBBSC/BGCC and/or any of their member agencies.
- e) Without limiting the generality of the foregoing, my participation in in-person meetings in connection with my volunteer involvement with the Agency exposes me to certain risks, including the risk of contracting Covid-19 which may result in serious illness or death. I assume all risks



associated with therewith including the risk of contracting Covid-19 and hereby release all the Agency, BBBSC/BGCC thereto.

- 3. **Background Check**. I understand that my acceptance into an Agency 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 police information check, for the purposes of confirming my suitability for a Volunteer role. I agree to provide all necessary consents for such background 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 the Agency, for the purpose of administering the Agency Program. This information may include my name, phone number, mailing address, date of birth, results of background check, etc. 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 an Agency Program, to a representatives of a site based location (i.e. a school/Club) in connection with my participation in a site based Agency Program, to the staff at BBBSC/ BGCC 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/BGCC, another BBBSC/BGCC agency selected by BBBSC/BGCC, or both and will be used for the purposes set out above. No information will be provided to persons or organizations outside of BBBSC/BGCC and its agencies, about parents, children or volunteers without their express prior written consent except where required by law.

# 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 events 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 BBBSC/BGCC 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.

Signature of Applicant	Signature of Parent or Legal Guardian (if required)
Applicant Printed Name	Parent or Legal Guardian Printed Name (if required)
Date	Date