



# VOLUNTEER APPLICATION

## Big Brothers Big Sisters

Victory through Performance: A Dallas ISD Dropout Reduction Partnership

**School Choice** (circle all that apply):

W.W. Samuell HS / Moises Molina HS / Franklin D. Roosevelt HS

**Program Preference** (circle all that apply):

School-based / Community-based / School-Plus

(at school only)

(after school & weekends)

(primarily at school plus some after school/weekends)

### Personal Information

First Name:		Middle Name:		Last Name:		Preferred Name to be called:	
Home Address:			Apt#	City:	County:	State:	Zip:
Home Phone #:		Work Phone #:		Cell Phone #:	Best # and time to call?	Email address:	
Date of Birth:		Gender: Male / Female	Marital Status:		Ethnicity:	Nationality:	
Occupation:				Employer:			
Address:				City:		State:	Zip:
How Long Employed:		May we contact you at work? Yes No			Work Hours:		
Highest Level of Education Completed:		Are you currently a student? Yes No		If yes, name of school:			Year in School:
Social Security #:		Possession of a driver's license is not required to participate in our programs but is required if you will be transporting a youth in a vehicle you are operating.		Do you have a driver's license? Yes / No If yes, list DL #		State issued:	Expiration date:
Have you previously applied to be (or have you been) a Big Brother or Big Sister? Yes No			If so, Where and When:				
How did you hear about Big Brothers Big Sisters?							
List any other organizations where you worked and/or volunteered directly with youth.		Organization Name(s):			Contact Name and Number / Email address		

### References

Please type or print information requested for four references: 1) current or past employer who has known you for at least **1 year**; 2) co-worker, neighbor or friend who has known you for at least **2 years**; 3) friend, family, or coworker who has known you at least **1 year** 4) close family member (spouse/domestic partner) or a friend who has known you for at least **3 years**.

Reference Name:	Day Phone Numbers/Ext:	Email Address / Fax Number:	Relationship to you:	How long known:
1.				
2.				
3.				
4.				

**I understand that:**

- 1) The references and youth organizations I listed may be contacted by mail, telephone, or email;
- 2) I am in no way obligated to perform any volunteer services;
- 3) The information I provided may be used to conduct a background check, to include driving records check, criminal background check, and other records where required by local, state, or federal law for volunteers working with youth;
- 4) As part of the enrollment process, the BBBS agency will be asking me to provide additional personal information prior to making recommendations for assignment;
- 5) Volunteer Big Brothers and Big Sisters are not excluded on the basis of race, color, religion, national origin, gender, marital status, sexual orientation, veteran status, or disability.
- 6) Parents are given the opportunity to express volunteer preferences in a match and those preferences are honored;
- 7) BBBS is not obligated to match me with a youth; and
- 8) If I am accepted as a Big Brother/Big Sister, I understand my obligation to meet with my Little Brother/Sister regularly and to inform BBBS agency staff as to the status of my match relationship every month. I further agree to accept the supervision of the BBBS staff and discontinue my service if I am requested to do so by the agency.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature, if under 18

\_\_\_\_\_  
Date

**Please return this completed application with copies of your driver's license and auto insurance along with the DALLAS ISD APPROVAL FORM to the nearest volunteer center listed below:**

**Mail to:**

Big Brothers Big Sisters  
Attn: Customer Relations  
450 E. John Carpenter FWY  
Irving, TX 75062

**Email to:**

intake@bbbstx.org  
Subject line: Dallas ISD Dropout Reduction  
Partnership

**Fax to:**

Attn: Customer Relations  
972-421-1770

**General Questions about Volunteering:**

214-441-2227 x711  
Toll Free No: 1-888-887-BIGS x711

## NOTICE AND AUTHORIZATION FOR BACKGROUND CHECK

### NOTICE

This is to inform you Big Brothers Big Sisters ("BBBS") may obtain information about you and/or your history related to potential criminal activity. The report from authorized sources may include, among other information, arrest, conviction, and driving record information. BBBS may additionally obtain information concerning your background, character, medical conditions, employment, education, and military experience. Information obtained by BBBS will be used only for the purposes of assessing your suitability to become a volunteer and matching you with a Little Brother or Little Sister.

### AUTHORIZATION

I hereby authorize and instruct BBBS to procure a report on me, including a criminal background history, which I understand may include, among other information, arrest, conviction, and driving record information. I also authorize and instruct BBBS to verify my Social Security number and to investigate my background and character in any manner they see fit to evaluate my potential as a Big Brother or Big Sister, including obtaining information from medical providers, employers, educational institutions, military agencies, and any other sources. If I become a volunteer for BBBS, I authorize BBBS to repeat these investigations at any time for as long as I remain a volunteer. I authorize BBBS to disclose relevant information obtained from its investigations to the parent/legal guardian of any child considered as a possible Little Brother or Little Sister to effectively enable the parent to exercise "parental choice" in accepting or denying me as a Big Brother or Big Sister for their child. I authorize and instruct any individual, corporation, and public or private entity having knowledge about me to furnish to BBBS any and all information they may have regarding me. I unconditionally release and hold harmless BBBS and its officers, directors, employees, and agents and any party furnishing information to them pursuant to this authorization from any liability, claims, charges, costs, or causes of action which I or my heirs, executors, or assigns may have as a result of the delivery, disclosure, non-disclosure, or omission of any information. I additionally agree to indemnify BBBS and its officers, directors, employees, and agents for any and all attorney fees, court costs, and other expenses resulting from investigating my background, gathering information concerning me, or verifying personal information about upon the written request of law enforcement agencies. Furthermore, I understand that BBBS holds the right to deny my participation in the program and, for confidentiality, is not required to disclose reasons for doing so. A photocopy of this authorization may be accepted in lieu of the original.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

### PERSONAL IDENTIFICATION AND BACKGROUND INFORMATION

PLEASE PRINT:

Complete, Legal Name: \_\_\_\_\_ Gender: M \_\_\_\_\_ F \_\_\_\_\_

If name changed (through marriage or otherwise), print former name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_

Drivers License Number \_\_\_\_\_ State \_\_\_\_\_ Expires \_\_\_\_\_

*RESIDENCES (Past 7 yrs listed current to oldest):*

City \_\_\_\_\_ State \_\_\_\_\_ County \_\_\_\_\_ Month/Year Moved To: \_\_\_\_\_ Month/Year Moved From: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ County \_\_\_\_\_ Month/Year Moved To: \_\_\_\_\_ Month/Year Moved From: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ County \_\_\_\_\_ Month/Year Moved To: \_\_\_\_\_ Month/Year Moved From: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ County \_\_\_\_\_ Month/Year Moved To: \_\_\_\_\_ Month/Year Moved From: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ County \_\_\_\_\_ Month/Year Moved To: \_\_\_\_\_ Month/Year Moved From: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ County \_\_\_\_\_ Month/Year Moved To: \_\_\_\_\_ Month/Year Moved From: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ County \_\_\_\_\_ Month/Year Moved To: \_\_\_\_\_ Month/Year Moved From: \_\_\_\_\_

Have you ever been (circle which) charged with / convicted of a (circle which) misdemeanor / felony? No \_\_\_\_\_ Yes \_\_\_\_\_

Details: \_\_\_\_\_

Have you ever been cited for a traffic violation? No \_\_\_\_\_ Yes \_\_\_\_\_ Details: \_\_\_\_\_

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For the safety of all children and volunteers, BBBS conducts a background check on all potential volunteers.

Signature \_\_\_\_\_

Disclosure and Consent to Release of Information  
Regarding Criminal or Abuse/Neglect History  
For Applicants, Employees or  
Volunteers of DFPS Contractors and Subcontractors

**Any person who will have direct contact with a Department of Family and Protective Services (DFPS) client or access to DFPS client information must complete this form.**

**1. Have you ever been convicted of or pleaded “guilty” or “no contest” to a felony or misdemeanor as an adult or juvenile? Include deferred or probated adjudications as well as convictions that have been set aside.** ☐ Yes ☐ No

**If yes, give details including date, location and nature of the offense and disposition for each such incident.**

**2. Are you currently charged with (indictment or official criminal complaints by county or district court) a felony or misdemeanor?** ☐ Yes ☐ No

**If yes, give details, including date, location, and type of charge.**

**3. Have you been or are you currently being investigated for allegedly abusing, neglecting, or exploiting a child, an elderly person, or a person with disabilities?** ☐ Yes ☐ No

**If yes, give details, including the state and county in which each such investigation occurred.**

I declare the information provided on this statement is true and correct. I understand that any misrepresentation or omission of the information requested may result in my being barred from providing direct services or accessing DFPS client records under a contract with DFPS.

I also agree to inform the contractor, who will in turn notify the DFPS contract manager, if I am named in complaints, indictments, or convictions of offenses as described in items 1 & 2, or if I am investigated for allegations as described in item 3 of this form.

I authorize DFPS to verify any information provided by me through the investigative records maintained by DFPS and any other state protective services agency, as well as records of any law enforcement agency, including the Texas Department of Public Safety and the Federal Bureau of Investigation.

I consent to DFPS' disclosure of any and all information, including confidential information, obtained from the above-referenced sources to the contractor listed below in order to facilitate my employment, subcontracting or volunteer service with such contractor.

\_\_\_\_\_  
Printed Name of Person Completing Form

\_\_\_\_\_  
Signature of Person Completing Form

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Big Brothers Big Sisters  
Contractor's Name

\_\_\_\_\_  
23393446  
Contract #

**IF YOU COMPLETED THE DALLAS ISD APPROVAL PROCESS PRIOR TO COMPLETING THE BBBS APPLICATION, YOU CAN SKIP THIS PAGE!**



### **FINAL REQUIREMENT – YOU ARE ALMOST DONE!**

Thank you volunteering to serve as a mentor (Big Brother/Big Sister) to a Dallas ISD student. It is district policy for all volunteers to complete the online Dallas ISD volunteer application/background check. It is quite simple to complete. This also allows Dallas ISD to keep an accurate account of the volunteers providing services to its children.

To help guide you through this final step, we have provided some helpful instructions below:

**Step 1:** Please fill out the online Dallas ISD form at: [www.dallasisd.org/partners/volreg\\_form.cfm](http://www.dallasisd.org/partners/volreg_form.cfm)

#### **Guidance on a few questions**

- Question 22: Select "Business/Organization Member" and then type "Big Brothers Big Sisters in the box below
- Question 27: Select the school(s) where you want to mentor. Your three options under the Dropout Reduction Partnership are Molina HS, Roosevelt HS and Samuell HS
- Question 30: Select "Mentor"

**Step 2:** Once you click on "submit" your background check will be run. You should then receive a "Status of Submission" message as show below. PRINT THIS IMMEDIATELY! You will need to take a copy of this to the school AND fax a copy to Big Brothers Big Sisters at 972-421-1770, Attn: Customer Relations.

A screenshot of a web page titled "Status of Submission". The page has a header with the "partners IN EDUCATION" logo on the left and the "Dallas Independent School District" logo on the right. Below the logos is a banner with the text "Support Our Schools" and "Community Relations". A navigation bar contains links for "Dallas ISD", "Dept Login", "Home", and "School Login". On the left side, there is a vertical menu with links: "Awards", "Calendars", "Donate", "Parents", "Partners/Volunteers", "Principal for a Day", "School Description", "School Needs", and "Special Programs". The main content area displays the following text: "<Your Name>", "Congratulations! You have been cleared to volunteer at the following school(s). We look forward to the valuable contribution you will be making to our schools and our students and thank you for your service.", "<School Name(s)>", "Please contact the school(s) partnership coordinator to schedule a required orientation/training session .", and "SINCE THIS PAGE CANNOT BE REPRODUCED, IT IS IMPORTANT THAT YOU PRINT IT SO YOU CAN TAKE IT TO THE SCHOOL(S) WHEN YOU GO FOR YOUR TRAINING."

If you have any questions regarding the Dallas ISD portion of the application, please contact Community Relations at 972-925-3920.

Thank you for volunteering!