

8. Have you had any driving citations and/or moving violations in the past 5 years?
 No Yes If yes, please list _____

9. How long have you lived in the area? _____
10. Do you anticipate any significant life changes over the next year or have you had any in the past year?
 No Yes If yes, please explain _____

11. Do you speak any foreign languages?
 No Yes If yes, which? _____

REFERENCES

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

1. Name _____ Years Known _____
 Day Phone _____ Home Phone _____ E-mail _____
2. Name _____ Years Known _____
 Day Phone _____ Home Phone _____ E-mail _____
3. Name _____ Years Known _____
 Day Phone _____ Home Phone _____ E-mail _____

I understand that:

1. The references I listed may be contacted by 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 a driving records check, criminal background check and other records where required by local, state or federal law for volunteers working with youth;
4. The BBBS agency is not obligated to match me with a youth;
5. Other BBBS Agencies or youth organizations where I have worked or volunteered may be contacted as references; and
6. As part of the enrollment process, I will be asked to provide personal information prior to any recommendations for assignment.

Signature _____ Date _____



Big Brothers Big Sisters
of The Village Family Service Center

AUTHORIZATION FOR RELEASE OF CONFIDENTIAL INFORMATION

Big Brothers Big Sisters of The Village Family Service Center
501 40th St. S. • 2nd Floor
Fargo, North Dakota 58103

I have been provided and understand information on the screening process for consideration as a Big Brother/Big Sister volunteer. I attest that the information on this application/release form is accurate to the best of my knowledge. I understand that it will be necessary for The Big Brothers Big Sisters Program to investigate my background and to check my character references. I understand and agree that this may include, but is not limited to, information and records pertaining to criminal history or background, driving records, child abuse and neglect record checks and auto insurance coverage.

I hereby give my consent for this information exchange and authorize such agencies and individuals to release any information requested by The Big Brothers Big Sisters Program, its agents, employees or other representatives.

This release will remain in effect for the duration of my participation in The Village Big Brothers Big Sisters Program.

DATE _____ APPLICANT'S SIGNATURE _____

(Please Print) FULL NAME _____
First Full Middle Name Last

PLEASE LIST complete addresses for the preceding five years including city, county and state, beginning with your current address. Please include the county.

COUNTY (mo./yr.) (mo./yr.)

1. _____ From _____ to _____
2. _____ From _____ to _____
3. _____ From _____ to _____
4. _____ From _____ to _____
5. _____ From _____ to _____
6. _____ From _____ to _____

If you need more space, please attach an additional sheet with this information.