



20538 Fraser Highway  
 Langley BC V3A 4R3  
 P: 604-530-5055 F: 604-530-1090  
 www.bbbslangley.com

As a Teen Mentor, you share with each member of Big Brothers Big Sisters of Langley, a valued reputation. We symbolize friendship, responsibility, trust and a concern for the protection and well being of children. As an integral part of our team, we expect that you comply with the following:

**All Mentors will:**

- Be consistent and positive role models by modeling responsible behaviours such as reliability, respect, honesty, appropriate manners, etc. along with a concern for the protection and well being of children
- Be supervised by the Agency Caseworker and remain accountable to her
- Be responsible for reporting any concerns to the Agency Caseworker and/or School Liaison/School Champion
- Have the ability to relate to children and adults, to adapt to change, and to work with the Big Brothers Big Sisters of Langley agency as a team member
- Be personally suitable and mature, and exhibit mental and emotional competence
- Be reliable and of good character, dependable, punctual, honest, fun loving and committed to open communication
- Have the ability and willingness to support the mission of the organization
- Successfully complete each phase of the Agency's Screening process
- Participate in the Child Safety Program and Mentoring Training
- Agree to function within the guidelines of the Agency and the School

**Go-Girls! Volunteer – Position Description**

Go Girls! is a group mentoring program promoting active living, balanced eating and positive self image. This program is designed to serve girls aged 8 to 12 years old and is facilitated by older female mentors. You will facilitate seven total sessions and each session is two hours in length working out to seven weeks. Every session is based on the three primary themes of the program and includes fun games, activities, and discussions. Sessions are interactive and encourage group participation and cooperation. The School Liaison will help to coordinate and support the program and to assist with any concerns that may arise.

**Position Requirements:**

- Work alongside another female mentor to present the program to 8-12 girls in grades 4,5, or 6
- Volunteer Mentors are women who have an interest in physical activity, healthy eating and mentoring
- Mentors must be able to commit to two hours after school once a week for a total of seven weeks
- Mentors will be responsible for planning, preparing, and delivering the Go Girls! Program
- The School Liaison will help to coordinate and support the program and assist with any concerns that may arise

**Game-On! Volunteer – Position Description**

Game On! is a group mentoring program for providing boys and young men with information and support to make informed choices about a range of healthy lifestyle practices. Through non-traditional physical activities, complemented with healthy eating support, participants are engaged in life skills, communication, and emotional health discussions designed to engage participants in the pursuit of life-long healthy lifestyles.

**Position Requirements:**

- Work alongside another male mentor to present the program to 8-12 boys in grades 4, 5, or 6
- Volunteer Mentors are men who have an interest in physical activity, healthy eating and mentoring
- Mentors must be able to commit to two hours after school once a week for a total of seven weeks
- Mentors will be responsible for planning, preparing, and delivering the Game On! Program
- The School Liaison will help to coordinate and support the program and assist with any concerns that may arise

### **Teen In School Mentor – Position Description**

The In-School Mentoring Program is offered for selected boys and girls in grades 2-5 for the most part but some exceptions are made. This is an opportunity for children to benefit from a one-to-one relationship with a caring, reliable adult or teen. It is also a way to expand the child's information about the world beyond their own family and neighborhood. The usual benefits of this mentoring relationship are an increase in the child's self-esteem, an increase in their overall interest and motivation in school and provision of an additional positive role model for the child.

#### **Position Requirements:**

- Meet with one child in their school for approximately one hour per week at the time agreed upon by all parties
- Make a commitment to see the child for approximately one hour each week
- Be a friend to the child
- Meet with the Agency Caseworker in person and by phone on a consistent schedule throughout the school year
- Work with the School and Program Liaison in the school to create a positive relationship

**In accordance with Big Brothers Big Sisters of Canada's national Child Safety Standards, all Teen Mentors will ALWAYS meet with their mentees and groups on school property ONLY when school staff are available, and never outside the permitted time.**

### **Application Checklist: Please complete the following pages:**

	<i>Page 3 – Application</i> – Fill out application in full and sign and date at the bottom.
	<i>Page 4 – Reference Sheet</i> Please complete with 3 references and have parents sign permission section at bottom
	<i>Page 5 – Volunteer Permission and Release</i> – Please sign and have parents sign
	<i>Page 7 – Media Consent Form</i> – Please sign and have parents sign
	<i>Page 8 – Offense Declaration Form</i> – Please sign and have parents sign
	<i>Page 9 – Confidentiality Policy</i> – Please read and sign yourself
	<i>Page 10 – Required School Reference Form</i> – it is mandatory for your teacher to sign



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 Mailing: Box 3052, Langley BC V3A 4R3  
 Phone: 604-530-5055  
 Fax: 604-530-1090  
 Web: www.bbbslangley.com

**Program of Interest:**    Go Girls!       Game On!       In-School Mentoring

**Teen Application**

**APPLICANT INFORMATION**

First Name		Middle Name(s)	
Last Name(s)		Gender	
Birth Date		Age	
Street Address			
City		Postal Code	
Length of time at above address?			
Home Phone		Mobile Phone	
Work Phone		Other	
Email Address			

Do you check email regularly?       Yes       No

School Name		Grade	
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**EMERGENCY CONTACT**

Contact Full Name		Phone	
Relationship to You			

**MEANS OF TRANSPORTATION**

Do you have transportation available?       Yes       No

If no, what alternatives? \_\_\_\_\_

**EMPLOYMENT (if applicable)**

Are you employed?       Yes       No

Company Name		Phone	
Position		Supervisor	

Length of time at above employment? \_\_\_\_\_

May we contact you at work?       Yes       No

\_\_\_\_\_  
Applicant PRINTED Name

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

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



## Reference Sheet

Big Brothers Big Sisters of Langley requires the names and information of a total of **4 INDIVIDUAL ADULT** references for an applicant. Please complete the below information **FULLY** and legibly. **Please supply a phone number or email address per reference. Please let the Referees know we will be contacting them.**

### 1. Employer, Supervisor, or Instructor who has known you for at least TWO years:

Name: \_\_\_\_\_ Occupation/Profession: \_\_\_\_\_

Describe how they know you: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### 2. Adult Family Relative who has known you for at least TEN years:

Name: \_\_\_\_\_ Occupation/Profession: \_\_\_\_\_

Describe how they know you: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### 3. Adult Person, who is not family, who has known you for at least TWO years: (i.e. friends parent, another teacher, someone you might have worked or volunteered with)

Name: \_\_\_\_\_ Occupation/Profession: \_\_\_\_\_

Describe how they know you: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### 4. Required School Reference – PLEASE PROVIDE REFERENCE ON PAGE 9 OF THIS PACKAGE

Name: \_\_\_\_\_ Occupation/Profession: \_\_\_\_\_

Describe how they know you: \_\_\_\_\_

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## Parent Permission – Teen In-School Mentor Volunteers

I, \_\_\_\_\_ (Parent/Guardian – *please print*) give permission for my son/daughter \_\_\_\_\_ (students name – *please print*) to participate as a Volunteer Teen Mentor in the In School Mentoring program for Big Brothers Big Sisters of Langley. I understand the responsibilities of this position, including travel to and from a local Elementary School and support my teen's involvement as a Volunteer Mentor.

\_\_\_\_\_  
PRINTED NAME of Parent

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date



## Volunteer Permission and Release Agreement

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**TO: Big Brothers Big Sisters of Langley (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 gross 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 BBBSC, 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 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 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, and 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 agency selected by BBBSC, 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:**

\_\_\_\_\_  
Applicant Printed Name

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

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

**Applicant's Parent:**

\_\_\_\_\_  
Parent Printed Name

\_\_\_\_\_  
Parent Signature

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

***Note: This release will expire upon cessation of your volunteering experience and closing of your membership with BBBSL.***



## MEDIA CONSENT FORM – TEEN VOLUNTEER

I, \_\_\_\_\_ (*please print full name*), hereby consent to Big Brothers Big Sisters of Langley to use any photographs, audio and/or video recordings of myself as taken or produced by media personnel and/or Association Members and/or Association Staff for the purpose of publicizing and promoting the work of the Association. I further waive any claim which I may have against Big Brothers and Big Sisters of Langley arising from the use of such photographs, audio and/or video recordings of myself, as aforesaid.

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

\_\_\_\_\_  
Signature of Teen Volunteer

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

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

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

\_\_\_\_\_  
Signature of Witness

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

	YES	NO
<b>First name only</b> may be used:	<input type="checkbox"/>	<input type="checkbox"/>
<b>Full name</b> may be used:	<input type="checkbox"/>	<input type="checkbox"/>

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**CONFIDENTIALITY CONCERN**

*Please complete this section if you have any of the following concerns:*

If you do **not** want your **photograph** to be used, please check here:

If you do **not** want a **audio/ video recording** of you to be used, please check here:

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

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

**Note: It is your responsibility to notify the office if the status of this consent changes.**



## Offense Declaration Form

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**I DECLARE**, since the last Criminal Records Check<sup>1</sup> provided to Big Brothers Big Sisters of Langley, or since the last Offence Declaration Form submitted to Big Brothers Big Sisters of Langley, that (please check all that apply):

- 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 Staff and/or the Executive Director at the time of the occurrence(s).

I 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 Langley.

\_\_\_\_\_  
Signature

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

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Witness Signature (**Parent Signature**)

Home Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Is it okay to call your work?    \_\_\_ Yes    \_\_\_ No

Email Address: \_\_\_\_\_

<sup>1</sup> Includes a Vulnerable Sector check for those who are in a position of trust.





## Confidentiality Policy

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All staff and volunteers of Big Brothers Big Sisters of Langley are required to abide by this Confidentiality Policy. Any breach of this policy will be considered grounds for termination.

Agency Service Delivery Staff will explain the confidential nature of our service to the volunteer, child and parent/guardian as early as possible in the orientation and/or screening process. At all times thereafter Service Delivery Staff will ensure the privacy of case information.

Information contained in the Casework files will not be disclosed by the Agency to any person without written approval of said person except in the following cases:

- Where the safety of a child depends upon divulging this information. This could include suspicion of neglect or abuse of a child. The proper authorities will be informed when necessary, which could result in the disclosure of confidential information without written consent from the person;
- When subpoenaed by the courts;
- Where required by law.

In the event that confidential information is requested to support a custody or access application, or for any court matter other than a “child protection” case, the agency will only release the information if required to do so by a Judge’s Order.

No staff member or volunteer shall use confidential information from the agency to advance any personal interest, financial or otherwise.

In accordance with Big Brothers Big Sisters of Canada’s National Standards:

- No information will be provided to persons or organizations outside of Big Brothers Big Sisters of Canada, and its agents, about parents, children or volunteers without their express prior written consent except where required by law.
- All information and records, including electronic records, shall be kept secure (for example, in a filing cabinet, desk, etc. under lock and key, password protected, etc.) and confidential at all times.

Case records will be accessible only to the Caseworker, Executive Director, Casework Supervisor, and in appropriate situations, other Caseworkers.

*By signing below, I indicate that I understand the Big Brothers Big Sisters of Langley’s policy around confidentiality and agree to abide by those rules.*

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

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



## REQUIRED School Reference Form

Please complete the following form and fax to Big Brothers Big Sisters of Langley

**Fax: 604-530-1090**

**APPLICANT:** Name: \_\_\_\_\_

**REFERENCE:**

First Name		Surname	
School		Position	

1) I have known the applicant for: \_\_\_\_\_ Years \_\_\_\_\_ Months

2) I know the applicant:  Well  A Little  Not at all

2) Please comment on the applicant's ability to follow through on their obligations/ commitments:

\_\_\_\_\_

\_\_\_\_\_

4) How would you characterize the applicant's ability to work independently?

\_\_\_\_\_

\_\_\_\_\_

5) Does the applicant have any problems or habits that you think we should be aware of:  No  Yes

If Yes, please explain: \_\_\_\_\_

6) Would you allow this applicant to be a Mentor to your child or a child you care about?  No  Yes

7) How would you describe the applicant's relationship with other students?

\_\_\_\_\_

\_\_\_\_\_

8) Has the applicant ever let personal problems affect his or her school performance?  No  Yes

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_  
Signature

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