

## SITE-BASED YOUTH APPLICATION AND PARENT PERMISSION FORM

Parent/Guardian Name:		Relation	Relationship to Child:		Do you have legal custody of the child?  ☐ Yes ☐ No				
Child's First Name:		Middle	Middle Name:		Last Name:				
Preferred Name/Nickname:		Child's	Child's Gender:		Child Date of Birth:				
What is the child's living	g situation?				-				
Two-parent househol	ld 🔲 On	e-parent ho	usehold (	Female /	] м	[ale)			
Other relative of chil	d (non-parent)	☐ Fo	ster Home[	☐Group H	ome	Other			
Home Phone #: Parent Cell Phone #:			Child Cell Phone #:			Is it okay to text parent? Yes No			
					Is it okay to text child? Yes No				
Home Address:		City:		Count	y:	State:		Zip:	
									**
Parent/Guardian E-mail:			Child E-mail:						
Child's School			Grade:				Teacher:		
Child's Race/Ethnicity:  American Indian or Asian  Black or African Am  Hispanic or Latino  Native Hawaiian or White	Other  Multi-race (check all that apply)								
Nationality/Country of C	Origin:								
Parent Place of Employ Parent Work Phone #: May we contact you (th		lian) at the	work numl	per listed a	bov	e? 🔲 ː	Yes 🔲 N	Vo	
Please check the best numparent/guardian)?  Home Cell Morning After	Please list an emergency contact if you are una Name: Phone Number: Relationship to Child:			you are unavaila	ble:				
Please mark the appropri	iate answers be	low:				_			
Does your child hav	e a parent/care	giver with c	urrent or pa	st military	exp	erience?	Yes 🔲	No	
Deployed? Yes No									
Has your child ever been	arrested or in	colved in the	e invenile i	istice syste	m?	$\square_{N_0}$ $\square_{\gamma}$	Yes Plea	se explain:	



	within the last year, has your child been in any trouble at school?
	☐ Poor Grades
	Skipping school/classes
	Truant
	Behavior problems (Describe:)
	Has been suspended (Reason for suspension:)
	Has been expelled (Reason for expulsion:)
	Sent to an alternative school (Reason for school change:)
Numbe	r of people (adults and children) in household:
Is parer	nt/guardian receiving income assistance?  Yes No
Does ye	our child receive free or reduced lunch? Yes- Free Yes - Reduced No
	our child receive any of these services?  cial Education Speech Therapy Tutoring In-school Counseling Other Counseling  ce:
Additio	onal Questions to help us match your child with a compatible mentor:
1.	Was your child in the School-Based Program last year? Tyes No If yes:
	a. Name of Big:
	b. Is there any reason the relationship should not continue?
2.	What strengths does your child have that a Big might be able to help grow?
3.	What are some of the needs your child has (could be social, emotional, behavior, or academic) that a Big may be able to help him/her with?
4.	Are there other ways you think a Big Brother or Big Sister can support your child?
5.	What is your child interested in?
6.	What would your child like to be when he/she grows up?
7.	How would you describe the best mentor for your child?
8.	Is there anything else we need to know before matching your child with a Big?
9.	Do you anticipate any significant life changes over the next year or have you had any in the past year (i.e. moving, child changing schools, etc.)?
10.	Does your child have any medical conditions (including food allergies) that might affect him or her participating in activities with a Big Brother/Big Sister?



- 11. After Big Brothers Big Sisters is over, this child should (Please Circle One):
  - a. Walk home
  - b. Small World (NG)
  - c. Bus home (Monroe)
  - d. Will be picked up

May Big Brothers Big Sisters	include your child's photo in the school yearbook and use their photo and first name for
promotional purposes?	Yes No

We will make every effort to honor your preferences for your child's mentor. BBBS does not discriminate on the basis of race, ethnicity, gender, marital status, sexual orientation, or religion. BBBS also matches boys with female volunteers when there is a lack of male volunteers available.

## By signing below, I give permission:

- 1. For my child to participate in the Big Brothers Big Sisters Program;
- 2. For the school to provide social and academic information about my child to Big Brothers Big Sisters (e.g. report cards. behavior reports);
- 3. To have my child complete questionnaires throughout his/her time in the program containing questions about school, home life, and personal interests;
- 4. To have my child talk with a Big Brothers Big Sisters staff person about personal safety;
- 5. For BBBS staff to provide contact information to the volunteer for the purpose of contacting my child.

I understand that the program is not obligated to match my child with a volunteer and that as part of the enrollment process I may be asked to provide additional information. I understand that the information I provide in the enrollment process will be kept confidential, unless disclosure is required by law and with exceptions noted. I understand that incidents of child abuse or neglect, past or present, must be reported to proper authorities. I understand that certain relevant information about my child will be discussed with the volunteer who is a prospective match (i.e. demographic information, information relevant to volunteer preferences, and information shared in my child's application).

I understand that I am to review the Code of Conduct with my child. My child and I will both sign this form. If behavior issues arise during the program, my child may be removed from the program.

I certify that all of the information on this form is true and correct and that all income is reported. I understand this information is being given for the receipt of federal funds, that the information on this application may be verified, and that deliberate misrepresentation of the information may subject me to prosecution under applicable state and federal laws. I understand this information will not affect my qualification for the program.

I do hereby release the organization and its employees, agents, members, volunteers and all other persons on its behalf from any and all liability for any damage or injury which such child might sustain while participating in said program and activities, including but not limited to any liability to any right of action that may occur to such child directly, or to me as his/her guardian. I understand that this information may be shared with the school or with partnership agencies when applicable.

If my child is matched with a Big Brother or Big Sister I agree to support my child's match by reviewing the program and

per semester, and immediately reporting any concerns		nois stair.
Parent/Guardian Signature:	Date:	<b>-</b>