



4 North 7th Street  
Zanesville, OH 43701  
[www.bbbsz.org](http://www.bbbsz.org)  
[info@bbbsz.org](mailto:info@bbbsz.org)  
Phone: 740-453-7300

Key: **Parent Signature**  
**Student Volunteer Signature**

## School-Based High School Volunteer Application

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Gender: \_\_\_\_\_ Pronouns: \_\_\_\_\_ Ethnicity/Race: \_\_\_\_\_

School: \_\_\_\_\_ Grade: 9th 10th 11th 12th

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Student Cell Phone: \_\_\_\_\_ OK to text? Yes No

Parent/Guardian Phone: \_\_\_\_\_ OK to text? Yes No

Student Email Address (**do NOT use your school email**): \_\_\_\_\_

### References

**All references must be over the age of 18. If you are under 18, one of your references must be a parent/guardian.  
The parent/guardian reference form will be provided to you in this packet.**

Family Member, Employer, or Friend:

Name: \_\_\_\_\_ Relationship to You: \_\_\_\_\_ Daytime Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to You: \_\_\_\_\_ Daytime Phone Number: \_\_\_\_\_

**Student Volunteer Certification**

*Read the below statements carefully and initial & sign to signify that you agree.*

I understand that:

1. The references I listed may be contacted by mail, telephone, or email [redacted]
2. I am in no way obligated to perform any volunteer services [redacted]
3. The BBBS agency is not obligated to match me with a youth [redacted]
4. As part of the enrollment process, I will be required to provide additional personal information prior to being recommended for a match [redacted]

\_\_\_\_\_  
Student Volunteer Signature

\_\_\_\_\_  
Date

**Parent/Guardian Certification**

*Read the below statements carefully and initial & sign to signify that you agree.*

I hereby give my permission for my daughter/son to volunteer as a High School Big Sister/Big Brother through Big Brothers Big Sisters of Zanesville (BBBSZ). I understand that:

1. The minimum time they will be volunteering is one school year, and that they will spend an hour each week with an elementary or middle school student \_\_\_\_\_
2. Their involvement in that program will be under the guidance of BBBSZ staff and that they are required to abide by all program rules and expectations \_\_\_\_\_
3. Transportation to/from the program site is the responsibility of a **person with a valid driver's license and valid car insurance**. All participants must follow state laws when driving to and from the school site. Student volunteers with a valid drivers license may transport themselves and others to/from the school site so long as they have prior permission from their parent/guardian, the parent/guardian of the students they wish to transport, and the school \_\_\_\_\_

Furthermore, I give my permission for Big Brothers Big Sisters of Zanesville to use the following information: student name, school, and/or picture for the following purposes: public relations, promotion, and recognition. In giving this consent, I release Big Brothers Big Sisters of Zanesville from any obligation or liability. I may terminate this consent in writing at any time.

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

\_\_\_\_\_  
Parent/Guardian Printed Name

\_\_\_\_\_  
Date

# High School Volunteer Pre-Interview Questionnaire

## QUESTION GROUP 1 – BASIC INFO

1. Have you ever applied to be/have been a Big Brother or Sister?

- Yes  
 No

If yes, where and when? \_\_\_\_\_

2. Do you have transportation to/from the school site?

- Yes  
 No

3. In identifying a child for you to work with, are there any special considerations you want us to know about?

- Yes  
 No

If yes, please explain:

4. Have you ever been charged with or convicted of a crime?

- Yes  
 No

If yes, please explain:

## QUESTION GROUP 2 – MOTIVATION

1. What do you know about volunteering with Big Brothers Big Sisters?
2. Why do you want to be part of the program?
3. What interests you about working with younger children?

### QUESTION GROUP 3 – MATCH RELATIONSHIP EXPECTATIONS

1. What do you think it means to be a mentor?
2. What are your expectations about becoming a Big?
3. How will you know if the match is successful?
4. What talents or strengths, either specific or more broadly, do you feel you can teach, role model or offer a child in a mentoring relationship?
5. How would you want me to describe you to a Little?
6. What might be your reaction if, after meeting with a Little a few times, either the overall experience or the child did not meet your expectations?

### QUESTION GROUP 4 – POTENTIAL CHALLENGES IN A MATCH

1. Is there anything you're nervous about or you think would be challenging in the role as a Big?  
 Yes  
 No  
If yes, please explain:
2. Can you think of any reasons that would make you want to stop being a Big?  
 Yes  
 No  
If yes, please explain:
3. Are there any ages or grade levels with which you would be uncomfortable mentoring a child?  
 Yes  
 No  
If yes, please list ages/grades:

4. How comfortable are you being matched with a child of a race or ethnicity different than your own? Select one below.
- Comfortable
  - Uncomfortable
5. How comfortable are you being matched with a child with different religious beliefs? Select one below.
- Comfortable
  - Uncomfortable
6. Do you imagine yourself being more successful with a more physically active or more laid-back child? Select one below.
- Physically Active
  - Laid-back
  - Either
7. Can you think of any qualities about a child that would be difficult for you in forming a healthy relationship?
- Yes
  - No
- If yes, please explain:

# Volunteer Ground Rules

*Please read the Volunteer Ground Rules below and initial, sign, and date to signal your agreement.*

1. I understand that seeing my Little Brother/Little Sister consistently is one of the most important things I can do as a Mentor, therefore I will see my Little once a week during the assigned time [redacted]
2. I understand that all contact with my Little is restricted to school grounds [redacted]
3. I understand that the relationship between my Little and me is a one-to-one relationship, therefore, I nor my Little will bring friends along [redacted]
4. I understand that I might be privy to personal information about my Little and their family members, which I will keep confidential [redacted]
5. I will maintain regular contact with the Big Brothers Big Sisters of Zanesville School-Based Coordinator by responding to calls, texts, emails, or letters. I will let them know if there is a concern or if my schedule changes in any way that affects my time with my Little [redacted]
6. If a problem arises in my match relationship, or if any of my information changes (i.e. phone number, address, place of employment, school schedule) I will notify the School-Based Coordinator immediately [redacted]
7. I understand that I will be asked to participate in a program evaluation at the end of the year [redacted]
8. I will adhere to school procedure for match visits, including verifying my Little's attendance on match visit days and contacting my School-Based Coordinator (or school secretary if at school) if I am unable to meet with my Little [redacted]
9. I will dress appropriately (following the school dress code), use appropriate language, and only discuss appropriate topics with my Little [redacted]
10. I will not use my cell phone during the time I am with my Little [redacted]

**Student Volunteer Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



**Big Brothers  
Big Sisters.**  
OF ZANESVILLE

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## High School Bigs Parent/Guardian Reference Form

*In serving as a reference on your child's application as a High School Big, please answer the below questions.*

Name of Student Volunteer: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_

Contact Information for Parent/Guardian:

\_\_\_\_\_

Phone

\_\_\_\_\_

Email

1. Do you believe your child will be a good mentor and a positive role model for a younger student?
  - a. Why or why not?
  
2. Describe your child's personality and interests (e.g., are they shy or outgoing, prefer indoor or outdoor activities, trustworthy, reliable, and consistent?)
  
3. What concerns, if any, do you have about your child fulfilling the required time commitment of one school year?
  
4. What impact do you expect volunteering will have on your child?
  
5. In what settings have you seen your child interact with younger children?
  - a. How would you describe those interactions?
  
6. What reservations or concerns do you have about your child's participation, if any?

## HS Big Applicant Checklist

***Reminder:*** we cannot consider your application or place you with a Little until we have received all required materials. Make sure you sign ALL pages of the required documents. Use the checklist below to make sure you have submitted all required documents.

- Application
- Volunteer Ground Rules
- Parent Reference Form (if under 18)
- Pre-interview Questionnaire