



# Big Brothers Big Sisters of Southwestern New Mexico

1832 W. Amador \*Las Cruces, NM 88005

(575) 523-9530 \*(575) 523-9531

## VOLUNTEER PRE-ENROLLMENT

Please Print Clearly

Note: Volunteers are not required to submit a formal application prior to the in-person interview. Rather, they provide certain identifying and demographic information, list references, and give consent for the agency to conduct a criminal background check. The information to be collected as represented on this form may be collected through a variety of means, e.g. separate criminal background consent form, directly entering volunteer demographic data into a database, etc. Also, if previously involved with another BBBS organization or youth organization, these will be contacted to verify individual's involvement.

First Name:		Middle Name:	Last Name:		Date of Birth:
Home Address:			City:	County:	State: Zip:
Mailing Address:			City:	County:	State: Zip:
Email Address:		Home Phone:	Cell Phone:		FAX:
Male Female	Social Security #:		Ethnicity:	Marital Status:	Highest Level Of Education:
Employer:		Address:			City:
State:	Zip:	Occupation:		Work Phone:	
Can We Contact You At Work: _____ Yes _____ No			Work Hours:		How Long Employed:
Possession of a Driver's License is not a requirement to participate in any our programs but is required if you will be transporting a youth in any vehicle you are operating.					
Do you have a Driver's License? _____ Yes _____ No		If yes, state of issue and #:		Expiration Date:	

### References

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

1. Employer's Name (or school if student):		Supervisor's Name (or teacher if a student):			
Address:		City:	State:	Zip:	
Day Phone #:		Fax Phone #:		Email:	
2. Coworker or Friend or Neighbor:					
Address:		City:	State:	Zip:	
Day Phone #:		Fax Phone #		Email:	
3. Spouse/Domestic Partner/Friend:					
Address:		City:	State:	Zip:	
Day Phone #:		Fax Phone #		Email:	

**Continued on back**

Have you ever applied to be a Big Brother Big Sister? Yes _____ No _____	Where and When:
What, if any, other youth organizations have you worked for or been involved with as a volunteer?	
Have you ever been involved before with Big Brothers Big Sisters in a capacity other than a Big? Yes _____ No _____	Where and When:

Please list all residences from current back for the last 5 years. The information you provide will be used to conduct a criminal records background check through various local, state, and national databases.

Current Home Address:	City:	County:	State:	Zip:
From:		To:		
Most Previous Home Address:	City:	County:	State:	Zip:
From:		To:		
2 <sup>nd</sup> Most Previous Home Address:	City:	County:	State:	Zip:
From:		To:		
3 <sup>rd</sup> Most Previous Home Address:	City:	County:	State:	Zip:
From:		To:		

I understand that:

- 1) The references I listed may be contacted by mail, telephone, or email;
- 2) I am in no ways 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) The BBBS agency is not obligated to match you with a youth; and
- 5) As part of our enrollment process, we will be asking you to provide additional personal information prior to make any recommendations for assignment.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



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