



Nutmeg
Big Brothers Big Sisters

30 Laurel Street, Suite 3
Hartford, CT 06106-1377

Tel. 860-525-5437
800-237-KIDS

Fax 860-525-4609

www.nutmegbigbrothersbigsisters.org
nutmeg@bbbsnutmeg.org

APPLICATION

Bigs are very important to Nutmeg Big Brothers Big Sisters. They are the ones who give their time (6-10 hours per month) to our Littles. The Bigs are the mentors who teach their Littles about important things in life, like flying a kite or setting goals, like learning to roller-skate or how to open a bank account and save money. They share Little Moments that bring Big Magic.

If this sounds like something that that you would like to do, we invite you to complete this application. As soon as we receive your signed application, you will be contacted to schedule an interview with one of our staff members.

Remember, to the world you may just be somebody, but to somebody, you may just be the world!

Please Print

Name _____
Last First Middle

Home Address _____
No. Street Apt.

City County State Zip

Home Phone _____ Cell Phone _____ Work Phone _____ Fax _____

E-mail Address _____

Male Female Marital Status: Single Married Separated Divorced Widowed

Social Security _____ Date of Birth ____/____/____ Ethnicity _____

Employer Name & Address _____
Name Street City State Zip

Occupation _____ Work Hours _____ How Long Employed _____

When/Where is the best time/place to contact you during the weekday? _____

Have you ever applied to be a Big? Yes No Where and When? _____

If you have worked for or been a volunteer for any youth organizations, please list them. _____

Possession of a driver's license is not a requirement to participate in any of 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 # _____ Expiry Date _____

I understand that: (1) this application in no way obligates me to perform any volunteer services; (2) the information I provide 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; (3) Nutmeg BBBS is not obligated to match potential volunteers with a youth; (4) as part of Nutmeg BBBS enrollment process volunteers will be asked to provide additional personal information prior to making any recommendations for assignment; (5) information gathered may be shared with Potential Littles and parent(s) or guardian(s) as part of the matching process. The information gathered becomes the property of Nutmeg Big Brothers Big Sisters.

By completing this form you consent to and understand that a criminal record check will be conducted for conviction and pending criminal case information and that it will not necessarily disqualify you from participation.

Signature _____

Date _____





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REFERENCES

Please print information requested for your 3 references.

- ❶ your current or past employer who has known you for at least 1 year;
- ❷ a co-worker, friend or clergy member who has known you for at least 2 years;
- ❸ a close family member (spouse/domestic partner) or a second friend who has known you for at least 3 years.

During the course of your enrollment process these references will be contacted by telephone, mail or e-mail. The input from your references allows us to get to know you better and helps to make the best possible match for you.

Please Print Your Name

Name _____
 Last First Middle

❶ Employer or Supervisor (Advisor or Professor, if student; Vendor if self-employed)

Name _____
 Title (Mr./Ms) Last First Middle

Company or School Name _____

Address _____
 Street City State Zip

Day Phone _____ Fax _____ E-mail _____

❷ Co-worker, Friend or Clergy

Name _____
 Title (Mr./Ms./Rev.) Last First Middle

Company or School Name _____

Address _____
 Street City State Zip

Day Phone _____ Fax _____ E-mail _____

❸ Spouse/Domestic Partner/Friend

Name _____
 Title (Mr./Ms) Last First Middle

Name _____ Relationship to You _____

Address _____
 Street City State Zip

Day Phone _____ Fax _____ E-mail _____

