



## QUESTIONNAIRE FOR BIG BROTHERS BIG SISTERS VOLUNTEERS

### APPLICANT INFORMATION

Last Name	First	M.I.	Date
What is your marital status? <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Domestic Partner <input type="checkbox"/> Widowed <input type="checkbox"/> Engaged			
Are you conversational in other language?    YES    NO If yes, what language(s)? _____			
What social media websites do you use? <input type="checkbox"/> Facebook <input type="checkbox"/> LinkedIn <input type="checkbox"/> Twitter <input type="checkbox"/> Pinterest <input type="checkbox"/> Google + <input type="checkbox"/> Blog (URL) _____            Other _____			
Do you own a car?                            YES                    NO			
Have you had a DUI and/or any traffic violations in the past 3 years?    YES                    NO If yes, what and when was it? _____			
Have you ever been arrested or convicted of a crime?                    YES                    NO If yes, when and what was the charge? _____			
How long have you lived in Massachusetts?    Years _____            Months _____			
Have you ever been in counseling?    YES                    NO    If yes, when _____			
Do you have any health concerns and/or taking any medications?    YES                    NO If yes, explain your health concerns and list all medications _____ _____			





Do you anticipate any significant life changes (moving, changing jobs/careers, changes in marital status, etc.) over the next 18 months or have you had any in the past year? YES NO If yes, briefly explain.

\_\_\_\_\_

\_\_\_\_\_

**EDUCATION**

High School:

From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
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College:

From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
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Other:

From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
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**EMPLOYMENT**

Company	Phone number
Address	Supervisor
Job Title	Date of Hire
Work Hours	Travel Demands

**EXPERIENCES WITH YOUTH – PLEASE LIST CURRENT OR PREVIOUS EXPERIENCES WORKING OR VOLUNTEERING WITH YOUTH**

Name of youth serving agency \_\_\_\_\_

Phone number \_\_\_\_\_

From	To	Title	Supervisor
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Name of youth serving agency \_\_\_\_\_

Phone number \_\_\_\_\_





**Big Brothers Big Sisters**  
of Massachusetts Bay

ADD A LITTLE.  
**IT'S A BIG DEAL.**

From	To	Title	Supervisor
Name of youth serving agency _____			
Phone number _____			
From	To	Title	Supervisor

**AGREEMENT AND SIGNATURE**

By submitting this questionnaire, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. Big Brothers Big Sisters does not discriminate on the basis of race, sex, religion, national or ethnic origin, disability, age, veteran status, or sexual orientation.

Signature:

Date:

