



**Big Brothers Big Sisters**  
of Santa Barbara County

## BIG BROTHERS BIG SISTERS ENROLLMENT SHEET

**General Information** *Please print (in ink) or type.*

Name: \_\_\_\_\_ Gender: M \_\_\_ F \_\_\_ Today's Date: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Home Address:

\_\_\_\_\_

*Street*

*Apt.#*

*City*

*State*

*Zip*

Mailing Address (if different):

\_\_\_\_\_

*PO Box/Street*

*Apt.#*

*City*

*State*

*Zip*

**References** *Please list three persons familiar with your character.*

- All must have known you for at least one year
- At least one reference must be a work or school reference
- At least one reference should be familiar with your home environment (This person may be a family member)

\*\*All information will be treated confidentially and will only be used in the enrollment and matching processes.

Name	Address	City	State	Zip	Phone

**Legal Record** *Please list any arrests, convictions and recent traffic violations.*

Arrest/Violation Date	Charge	Disposition/Result

**Release**

I give permission for Family Service Agency to conduct a background inquiry including my criminal, driving and clinical history, as well as to check personal references and any other information as deemed necessary to determine my appropriateness for participation in the Big Brothers Big Sisters program. I understand that I may not be accepted into the program and that Big Brothers Big Sisters reserves the right to withhold information regarding reasons for non-acceptance. I have read the above notification and understand and agree to its contents.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*Thank you for your time!*