



34 East 12th Avenue, Vancouver, BC V5T 2G5  
P: 604.873.4525 F: 604.873.2122 [www.bigsisters.bc.ca](http://www.bigsisters.bc.ca)

## Study Buddy Volunteer Application

### **Application Instructions:**

Please save this document to your computer, fill out the application form and email it to [info@bigsisters.bc.ca](mailto:info@bigsisters.bc.ca).  
Questions? Call 604.873.4525 ext 300.

Dear Study Buddy applicant,

Thank you for your interest in volunteering as a Study Buddy tutor! In this package you will find your Study Buddy application form and instructions on how to complete your Criminal Record Check.

The Study Buddy Program matches girls (ages 7-17) with volunteer tutors who offer the girls educational guidance and support. For a minimum of six months, Study Buddy matches meet for one hour a week to work on the Little Sister's school work and help her reach her academic goals. Goals can range from improving study skills, to working on math problems, to making sure homework is handed in on time.

With the support of a Study Buddy tutor, Little Sisters are encouraged and equipped to improve their educational performance and meet their academic goals, contributing to their overall sense of self-esteem.

Before you fill out this application, please make sure meet the criteria to be a Study Buddy. **YES, I:**

- ✓ Am at least 19 years of age;
- ✓ Have a high school diploma;
- ✓ Can commit to meeting my Little Sister for 1 hour a week for a minimum of 6 months;
- ✓ Have some experience helping others learn;
- ✓ Am a Lower Mainland resident who has lived in Canada for at least one year (or I can obtain an International Criminal Record Check from my most recent country of residence);
- ✓ Have some form of post-secondary education in-progress or completed;
- ✓ Am fluent in reading, writing and speaking English.

Please **fill out the enclosed application form** and return it to Big Sisters by email, fax, mail or in person. Please also **initiate your criminal record check as soon as possible** as it can take some time before you receive the results. Once we receive your application we will contact you to schedule your training session and interview. You will have a maximum of 3 months to complete the remainder of the application steps (criminal record check, references, training and interview).

**What next?** Once we've reviewed your application and Criminal Record Check, checked your references, and you've attended an interview and training session, we will determine your acceptance and notify you of the outcome (please note that acceptance is at the sole discretion of the board and staff of Big Sisters of BC Lower Mainland). Once you are accepted, we will start looking for a suitable Little Sister Study Buddy for you, looking at a variety of factors such as where you live and the academic needs of the girls on our waiting list. We work hard to find a compatible match for each Study Buddy - and sometimes that can take a bit of time - but it'll be worth the wait!

Thank you so much for your interest in becoming a Study Buddy — we look forward to meeting you!

*Big Sisters of BC Lower Mainland*

**P.S. Need more info? Contact us at 604.873.4525 ext. 300 or [info@bigsisters.bc.ca](mailto:info@bigsisters.bc.ca).**

**P.P.S. Check out our Big Sisters Video (<http://bit.ly/mqpHmf>) and the inspiring stories on our 50th Anniversary Blog (<http://bigsistersofbc.lowermainland.blogspot.com/>)!**



# Study Buddy Volunteer Application

The information you provide on this form will be maintained as a confidential, secure record.

**PHOTO**  
Email us a digital photo of yourself along with your completed application or bring photo ID with you to your interview. <http://bit.ly/lx6t0m>

**YES**, I have read the 'BIG Intro' presentation for potential Big Sisters on the Big Sisters website (please view presentation at <http://bit.ly/lx6t0m>)

Full Name \_\_\_\_\_ Age \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_

Postal Code \_\_\_\_\_ Home Tel. \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_ Alternate Email \_\_\_\_\_

Date of Birth \_\_\_\_\_ Birth Place \_\_\_\_\_

Length of time at present home address \_\_\_\_\_

Previous addresses if less than 2 years at present address:

## Employment

Place of Employment \_\_\_\_\_

Employer's Address \_\_\_\_\_ Tel. \_\_\_\_\_ ext \_\_\_\_\_

Work Hours \_\_\_\_\_ Is it convenient to phone you at work?  Yes  No

Job Title \_\_\_\_\_ Length of time at present job \_\_\_\_\_

Previous jobs and length of stay at each job:

## Your Ethnic Background (Put a 'Y' beside all that apply. Optional question—for statistical purposes only.)

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> Aboriginal       | <input type="checkbox"/> Black          | <input type="checkbox"/> Caucasian      | <input type="checkbox"/> Western European |
| <input type="checkbox"/> Eastern European | <input type="checkbox"/> Latin American | <input type="checkbox"/> Middle Eastern | <input type="checkbox"/> Chinese          |
| <input type="checkbox"/> Japanese         | <input type="checkbox"/> Filipino       | <input type="checkbox"/> Korean         | <input type="checkbox"/> South Asian      |
| <input type="checkbox"/> South East Asian | <input type="checkbox"/> Other          |   |   |

## Emergency Contact Information

Full Name \_\_\_\_\_ Relationship to You \_\_\_\_\_

Tel. \_\_\_\_\_ Cell \_\_\_\_\_

Do you prefer to receive the semi-annual Big Sisters newsletter by:  Mail  Email (PDF)

First language \_\_\_\_\_ Other languages (incl. sign language) \_\_\_\_\_

Marital Status:  Single  Married  Divorced  Widowed  Separated  Common Law

Sex and age(s) of children, if any: \_\_\_\_\_

With whom do you share your living unit? *(Your live-in spouse/partner will be required to undergo a Criminal Record Check before you are accepted as a Study Buddy. We also ask that you inform us if anyone else you live with has a criminal record. The presence of someone in your household with a criminal record does not automatically disqualify you from becoming a Study Buddy, depending upon the nature of the offense(s).)*

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

Does anyone in your home own firearms?  Yes  No If yes, how are they stored?

How did you hear about Big Sisters? *(Check all that apply)*

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> TV            | <input type="checkbox"/> Transit Ad               | <input type="checkbox"/> Article in Newspaper/Magazine |
| <input type="checkbox"/> Presentation  | <input type="checkbox"/> Volunteer Website/Centre | <input type="checkbox"/> Volunteer Fair                |
| <input type="checkbox"/> Word of Mouth | <input type="checkbox"/> Social Media             | <input type="checkbox"/> Print Ad                      |
| <input type="checkbox"/> Radio         | <input type="checkbox"/> Other                    |  |

Specify if possible *(i.e. The Beat, Facebook, Go Volunteer, etc)* \_\_\_\_\_

What qualities do you feel you have to offer a Little Sister in a tutoring relationship?

Comment on your past and present health (physical, emotional and mental):

What experiences have you had with children/youth? Have you applied to be a Study Buddy or Big Sister before or have you volunteered with another youth-serving agency before? If so, when and where?

Describe the experiences you have had with people of different cultures, religions and sexual orientations.

What are your beliefs about children/childhood?

Education Completed/In-Progress:

High School \_\_\_\_\_

College or University \_\_\_\_\_

Trade or Technical School \_\_\_\_\_

Other \_\_\_\_\_

Are you participating in the UBC Trek Program?  Yes  No

Teaching/tutoring experience (if any):

Number of years of teaching/tutoring experience \_\_\_\_\_

Do you have a teaching certificate?  Yes  No

Are you in the process of obtaining a teaching certificate?  Yes  No

Which subjects would you prefer to teach? (check all that you like)

English  Math  Science  Languages  Social Studies  Other \_\_\_\_\_

The time commitment we require for Study Buddy tutors is 1 hour/week for 6 months. Do you feel you can easily manage this with your schedule and future plans?

Do you anticipate any change in residence, education, employment, health, or domestic status in the next year?

Yes  No If yes, please explain:

## References

Please provide the names, full addresses (including postal codes), phone numbers, and email addresses of **3 people who have known you for at least 2 YEARS** and who will complete written reference forms for you. You need to provide one **professional reference**, one **friend reference**, and one **family member reference**. Spouses, partners, fellow applicants, and current roommates are NOT appropriate references. Please contact your references to inform them that Big Sisters will be contacting them via email (if provided) to provide a reference for you and that their reference is required promptly so we can proceed with your application.

### PROFESSIONAL WORK REFERENCE (Past or current employer, co-worker, teacher, or volunteer supervisor)

Full Name \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ Postal Code \_\_\_\_\_  
Home Tel. \_\_\_\_\_ Work Tel. \_\_\_\_\_  
Cellular Tel. \_\_\_\_\_ Fax \_\_\_\_\_  
Email \_\_\_\_\_ Occupation \_\_\_\_\_  
Relationship \_\_\_\_\_ How long you've known this person \_\_\_\_\_

### FRIEND REFERENCE

Full Name \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ Postal Code \_\_\_\_\_  
Home Tel. \_\_\_\_\_ Work Tel. \_\_\_\_\_  
Cellular Tel. \_\_\_\_\_ Fax \_\_\_\_\_  
Email \_\_\_\_\_ Occupation \_\_\_\_\_  
Relationship \_\_\_\_\_ How long you've known this person \_\_\_\_\_

### FAMILY MEMBER REFERENCE

Full Name \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ Postal Code \_\_\_\_\_  
Home Tel. \_\_\_\_\_ Work Tel. \_\_\_\_\_  
Cellular Tel. \_\_\_\_\_ Fax \_\_\_\_\_  
Email \_\_\_\_\_ Occupation \_\_\_\_\_  
Relationship \_\_\_\_\_ How long you've known this person \_\_\_\_\_

YES, I have known these 3 people for at least 2 years.

YES, I have let these 3 people know that they will be contacted by Big Sisters for a reference check.

## Type of Little Sister Study Buddy

Age range preference (7-17) \_\_\_\_\_

Elementary school (age 7-12)     Secondary School (age 13-17) *(Check one or both)*

<b>Are you <u>open</u> to being matched with a Little Sister with:</b>	<b>Yes / No / Maybe</b> <i>(Type Y, N, or M for each line below)</i>	<b>Knowledge/Experience With</b> <i>Please comment briefly if you have knowledge of or experience in dealing with any of the things listed below.</i>
Behaviour challenges	_____ (Y/N/M)	_____
Attention Deficit Disorder (ADD/ADHD)	_____ (Y/N/M)	_____
Fetal Alcohol Syndrome (FAS/FAE)	_____ (Y/N/M)	_____
Anger Issues	_____ (Y/N/M)	_____
Demanding	_____ (Y/N/M)	_____
Other cultures/races	_____ (Y/N/M)	_____
Other religions	_____ (Y/N/M)	_____
Chatty/energetic	_____ (Y/N/M)	_____
Shy/withdrawn	_____ (Y/N/M)	_____
Low self-esteem	_____ (Y/N/M)	_____
Cling-y/needy	_____ (Y/N/M)	_____
Poor body image	_____ (Y/N/M)	_____
Hygiene issues	_____ (Y/N/M)	_____
Lack of manners	_____ (Y/N/M)	_____
Weight issues	_____ (Y/N/M)	_____
Allergies/asthma	_____ (Y/N/M)	_____
Learning disabilities	_____ (Y/N/M)	_____
Physical disabilities	_____ (Y/N/M)	_____
Developmental disabilities	_____ (Y/N/M)	_____
Physically abused	_____ (Y/N/M)	_____
Sexually abused	_____ (Y/N/M)	_____
Smoking	_____ (Y/N/M)	_____
Lesbian/questioning	_____ (Y/N/M)	_____
Mental health issues	_____ (Y/N/M)	_____
HIV/AIDS	_____ (Y/N/M)	_____
Foster care	_____ (Y/N/M)	_____
Depressed parent	_____ (Y/N/M)	_____
Untidy home	_____ (Y/N/M)	_____
Drug/alcohol abuse	_____ (Y/N/M)	_____
Over-involved parent	_____ (Y/N/M)	_____
Frequent parent/child conflict	_____ (Y/N/M)	_____
Lesbian/gay parent	_____ (Y/N/M)	_____
Social assistance	_____ (Y/N/M)	_____
Terminal/chronic illness	_____ (Y/N/M)	_____

## Location of Little Sister Study Buddy & Other Info

Please rank, in order of preference, all of the locations you would be comfortable travelling to and from when meeting with your Little Sister each week.

___ Tsawwassen	___ Delta	___ Ladner	___ Cloverdale
___ Surrey	___ South Surrey	___ Burnaby	___ New Westminster
___ Richmond	___ Vancouver	___ North Vancouver	___ West Vancouver
___ Coquitlam	___ Port Moody	___ Port Coquitlam	

Do you drive and have a car available to you?  Yes  No

Does the car have a passenger side air bag?  Yes  No

How much time are you willing to travel for? \_\_\_\_\_

Have you ever been charged with any driver violations?  Yes  No If yes, please explain:

***NOTE:*** All volunteer mentors who transport their Little Sisters in their vehicles must have current, valid insurance on their personal vehicle. Big Sisters encourages (but does not require) all volunteers who drive with their mentees to carry \$3,000,000 liability coverage.

Have you ever been charged and/or convicted of a criminal offence?  Yes  No If yes, please explain:

Is there anything else you think we should be aware of in looking for a good match for you or anything that you would like to make note of to discuss with the Study Buddy Caseworker during your interview.

## Hypothetical Scenarios

*Below are three common situations that could come up during your time as a Study Buddy. Please read each one carefully and consider your comfort level with each and then respond to the questions.*

### **Scenario #1**

Your Little Sister is regularly forgetting to bring her school work to your weekly study sessions and has missed a number of sessions with you. As a result, you feel there is no progress being made in your time together.

Why do you think this may be happening?

How would you handle this situation?

### **Scenario #2**

An unexpected opportunity has come up for you that will affect your ability to fulfill your six month commitment to your Little Sister Study Buddy.

How would you handle this situation?

How do you think your Little Sister would feel?

### **Scenario #3**

You have been matched with your Little Sister Study Buddy for two months and you get along really well. You also have a good relationship with her parents. After a study session, your Little Sister's mom asks if it would be possible for you to also help her other daughter with her homework because she has noticed an increase in your Little Sister's self-esteem. Your Little Sister's mom also asks if you could drive your Little Sister to her after-school rehearsal next Thursday because she is picking up an extra shift at work.

How would you handle this situation?

What aspects of this situation are you comfortable with, and why?

What about this situation did you find difficult, and why?

### **Values and Triggers**

We encourage you to take some time to identify and evaluate your personal values and corresponding triggers and then discuss them with the Big Sisters caseworker during your interview so she can take this information into consideration when matching you with a Little Sister Study Buddy.

**Value:** A standard or principle that is regarded as desirable or worthwhile.

**Trigger:** To set off, initiate or actuate. A stimulus that *triggers* a reflex.

**EXAMPLE:** Jane *values* punctuality. She is always on time for work, appointments and visits with friends and family. Jane is *triggered* when her co-worker walks in 15 minutes late for a meeting.

Do you have any strong values or triggers that we should know about before matching you with a child?

## Media Consent

Photos and audio/video recordings of volunteers & Little Sisters are occasionally used to help us publicize and promote the work of Big Sisters of BC Lower Mainland. This may include use of photos, audio/video recordings, and names in newspapers/magazines, on radio/television, on the Big Sisters website, newsletter, and social media, and in other agency materials. Please indicate whether or not you give consent in each of the three sections below:

I give consent for **photos and audio/video recordings** of me to be taken and used to publicize the work of Big Sisters.  Yes  No

I give consent for my **name** to be used to publicize the work of Big Sisters.  Yes  No

I give consent for my **name to be listed in the “New Matches” and “Match Anniversaries” columns in the Big Sisters newsletter.**  Yes  No

If I am giving consent to Big Sisters of BC Lower Mainland (as indicated above) to use my name, photographs, and/or audio or video recordings of myself as taken or produced by media personnel and/or Agency Members and/or Agency Staff for the purpose of publicizing and promoting the work of the Agency, I waive any claim which I may have against Big Sisters of BC Lower Mainland arising from the use of such photographs, audio and/or video recordings of myself, as aforesaid. This consent and waiver shall remain in effect for the duration of my involvement with Big Sisters of BC Lower Mainland unless otherwise revoked. I understand that it is my responsibility to notify the office if the status of this consent changes.

## Permission and Release Form

I hereby authorize Big Sisters of BC Lower Mainland to contact any or all of the references herein for the purposes of processing my application to become a volunteer with Big Sisters of BC Lower Mainland. I understand that these references will be contacted in confidence.

I further authorize any individuals, firms, corporations, government or other regulatory departments, and Police Department or other organization to release information and copies of documents pertaining to myself to Big Sisters of BC Lower Mainland in order to consider my application to volunteer with Big Sisters of BC Lower Mainland, on the understanding that such information will be held in strict confidence.

I give permission to Big Sisters of BC Lower Mainland to release pertinent information regarding my file to the parent/guardian of the child in the process of match selection. Further, I agree to allow my file to be viewed by an Agency Reviewer from Big Brothers Big Sisters of Canada, at the time of an agency review, should it be requested. I further grant Big Sisters of BC Lower Mainland permission to release my name, date of birth, address, volunteer position applied for, and notice of acceptance or rejection to Big Brothers Big Sisters of Canada. I understand that this application and subsequent information in my file is the property of Big Sisters of BC Lower Mainland.

I understand this application and subsequent information in my file is the property of Big Sisters of BC Lower Mainland. I understand that if Big Sisters of BC Lower Mainland should cease operation, my complete file becomes the property of Big Brothers Big Sisters of Canada. I understand that the information in my file will be retained by Big Brothers Big Sisters of Canada for a period ending 75 years after the close of my final match.

I acknowledge and accept that this application does not guarantee acceptance into the program, and that Big Sisters of BC Lower Mainland is under no obligation to accept or assign me as a volunteer, and is not obliged to provide a reason.

If I am matched, I understand that I am solely responsible for the care of, and will supervise, the child with whom I am matched during tutoring sessions and activities.

I hereby release and forever discharge Big Sisters of BC Lower Mainland, and their employees, directors and volunteers from any cause of action or claim for damages, whether bodily injury, death, property damage, or emotional trauma, anxiety or distress arising from my association with Big Sisters of BC Lower Mainland.

**I understand and consent to the implications of this Permission & Release waiver\*. By typing my name in the line below I am confirming that this waiver is made of my own free will and without duress and that the information I have provided in this entire application form is accurate and true to the best of my knowledge.**

**Printed Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Applicant:** \_\_\_\_\_  
(Attach digital signature or click on red flag to create one)

*\*If you have any questions about this Permission and Release Form, you may wait to sign this form until you attend your screening interview at Big Sisters, at which time you can ask any questions that you have about this waiver.*

Release to share information with individuals outside of Big Brothers Big Sisters will expire within one year of the above date.

**Please email your completed application to [info@bigsisters.bc.ca](mailto:info@bigsisters.bc.ca)**

***Applications can also be sent by mail or fax:***

Big Sisters of BC Lower Mainland  
34 East 12<sup>th</sup> Avenue, Vancouver, BC V5T 2G5  
Fax: 604-873-2122

### **Questions?**

Call us at 604-873-4525 ext. 300 or email [info@bigsisters.bc.ca](mailto:info@bigsisters.bc.ca)

## **Criminal Record Check Information for Study Buddy Applicants**

All Study Buddy volunteer applicants must obtain a Canadian Criminal Record Check (including a vulnerable sectors check) through their local police/RCMP detachment. Any live-in partners/spouses of applicants must also obtain a Criminal Record Check.

Applicants must have lived in Canada for at least one year before they can apply to be a volunteer mentor with Big Sisters of BC Lower Mainland. For those that have lived in Canada less than one year but would still like to apply as a volunteer now, they must initiate an International Criminal Records Check from their most recent country of residence and provide it to Big Sisters along with their volunteer application. If an applicant has lived in Canada between 1-2 years, Big Sisters of BC Lower Mainland may also require an International Criminal Records Check at the Agency's discretion. The same parameters apply to live-in partners of applicants who have lived in Canada less than one year.

1. To obtain a Canadian Criminal Record Check (including a vulnerable sectors check), each volunteer applicant (and their partner/spouse, if applicable) must appear in person at the Police/RCMP detachment in their city/municipality of residence with the attached Criminal Record Check Fee Letter provided by Big Sisters of BC Lower Mainland. See attached Police/RCMP Detachments list for your detachment's location and hours.
2. Bring proper personal identification with a signature on it and at least one piece of photo identification. See attached Police/RCMP Detachments list for exact ID requirements.
3. On the "consent to disclose personal information" section of the Criminal Record Check form that you will fill out at the Police/RCMP detachment, identify the contact person as: Jennifer Rentz, Manager of Programs & Services, Big Sisters of BC Lower Mainland, 34 East 12<sup>th</sup> Avenue, Vancouver, BC V5T 2G5.
4. Criminal Record Checks are free for Study Buddy volunteers with the exception of Vancouver (\$27), West Vancouver (\$22) and Port Moody (\$10). For partners or spouses, Criminal Record Checks are also free with the exception of Burnaby (\$50), Vancouver (\$27) and West Vancouver (\$22). In order to qualify for the reduced cost/free Criminal Record Check, you (and your partner/spouse) must bring the attached Criminal Record Check Fee Letter(s) to your local Police/RCMP detachment.
5. Bring your Criminal Record Check to Big Sisters, attention Linda Edamura, by mailing or delivering to: 34 East 12<sup>th</sup> Avenue, Vancouver, BC, V5T 2G5.

**Questions? Contact Big Sisters at 604-873-4525 ext. 300**

## Greater Vancouver Police & RCMP Detachments

### IMPORTANT NOTES:

- You **must** get your Criminal Record Check done at the Police/RCMP detachment in your city/municipality of residence. Please phone before going to confirm the detachment's hours of operation.
- In order to get your Criminal Record Check for free or at the reduced costs listed below, you (and your spouse/partner, if applicable) must each bring the attached Criminal Record Check Fee Letter(s) provided by Big Sisters.

DETACHMENT	HOURS/DAYS	COST	DETAILS
Burnaby – RCMP 6355 Deer Lake Avenue Burnaby, BC V5G 2J2 Phone: 604-294-7922	8:00am – 8:00pm 7 days a week	FREE for volunteers \$50 for partner/spouse	1 picture ID & 1 other (1 must have current address) Cash, Interac, Visa, or MasterCard
Coquitlam – RCMP 2986 Gilford Way Coquitlam, BC V3B 7Y5 Phone: 604-945-1550	8:00am – 8:00pm 7 days a week	FREE for volunteers FREE for partner/spouse	1 picture ID (drivers license), BCID or valid passport
Delta Police Department 4455 Clarence Taylor Crescent Delta, BC V4K 3E1 Phone: 604-946-4411	8:00am – 4:00pm Monday - Friday	FREE for volunteers FREE for partner/spouse	Drivers license or gov't issued photo ID with current address
New Westminster Police 555 Columbia Street New Westminster, BC V3L 1B2 Phone: 604-525-5411	8:30am – 9:00pm/Mon–Sat 9:00am – 5:00pm/Sunday	FREE for volunteers FREE for partner/spouse	1 picture ID & 1 other (1 must have current address)
North Vancouver – RCMP 147 East 14 <sup>th</sup> Street North Vancouver, BC V7L 2N4 Phone: 604-985-1311	8:00am – 6:30pm/Mon–Fri 10:00am – 5:30pm/ Sat-Sun	FREE for volunteers FREE for partner/spouse	1 picture ID & 1 other (1 must have current address) or drivers license
Port Coquitlam (see Coquitlam)			
Port Moody Police Department 3051 St. John's Street Port Moody, BC V3H 2C4 Phone: 604-461-3456	8:00am – 8:00pm Monday – Friday	\$10 for volunteers \$10 for partner/spouse	1 picture ID – drivers license
Richmond – RCMP 6900 Minoru Boulevard Richmond, BC V6Y 1Y3 Phone: 604-278-1212	8:00am – 8:30pm 7 days a week	FREE for volunteers FREE for partner/spouse	1 picture ID with current ad- dress; drivers license or valid passport
Surrey – RCMP 14355 – 57 <sup>th</sup> Avenue Surrey, BC V3X 1A9 Phone: 604-599-7619	8:00am – 6:30pm/Mon-Fri 9:00am – 3:30pm/Sat-Sun	FREE for volunteers FREE for partner/spouse (cash or debit card)	1 picture ID & 1 other (1 must have current address)
UBC Campus Detachment 2990 Westbrook Mall Vancouver BC V6T 2B7 Phone: 604-224-1322	8:00am – 4:00pm Monday - Friday	FREE for volunteers FREE for partner/spouse	1 picture ID & 1 other Proof of UBC residence Provide stamped, self-addressed envelope
Vancouver Police Department 2120 Cambie Street (at 5 <sup>th</sup> Ave) Vancouver, BC V5Y 3Z3 Phone: 604-717-3043	8:00am – 5:00pm Monday – Friday <i>(closed on statutory holidays)</i>	\$27 for volunteers w/ letter \$27 for partner/spouse w/letter	1 picture ID & 1 other (1 must have current address) Provide self addressed enve- lope; Cash or debit only
West Vancouver Police 1330 Marine Drive West Vancouver, BC V7T 1B5 Phone: 604-925-7300	9:00am - 5:00pm Monday - Friday	\$22 for volunteers \$22 for partner/spouse	1 picture ID with current ad- dress
White Rock – RCMP 15299 Pacific Avenue White Rock, BC V4B 1R1 Phone: 778-593-3600	8:30am – 4:30pm Monday - Friday	FREE for volunteers FREE for partner/spouse	1 picture ID – drivers license

**CRIMINAL RECORD CHECK FEE LETTER FOR STUDY BUDDY APPLICANT**

**\*\*PRINT THIS PAGE AND TAKE WITH YOU TO YOUR LOCAL POLICE/RCMP STATION\*\***



**Big Sisters  
of BC Lower Mainland**

34 E. 12th Avenue, Vancouver, BC V5T 2G5  
Phone: 604.873.4525 Fax: 604.873.2122

To Whom It May Concern:

\_\_\_\_\_ has applied to be a volunteer at Big Sisters of BC Lower Mainland. As a volunteer with this non-profit organization, this volunteer will receive no remuneration for their services at Big Sisters. Big Sisters is a non-profit organization committed to enhancing the confidence, self-esteem and well-being of girls, ages 7 through 17 years, through supportive friendships with caring women on a volunteer basis.

We would appreciate your assistance in providing the Criminal Record Check (including a Vulnerable Sector Search) at either the volunteer rate or for free, as this is a volunteer position with our agency.

If you require further information or documentation, please call me at 604-873-4525 ext. 303. Your consideration of this is greatly appreciated.

Sincerely,

A handwritten signature in purple ink, appearing to read "Jennifer Rentz". The signature is fluid and cursive, with the first name being the most prominent.

Jennifer Rentz  
Manager of Programs & Services

**CRIMINAL RECORD CHECK FEE LETTER FOR PARTNER/SPOUSE OF STUDY  
BUDDY VOLUNTEER APPLICANT**

**\*\*YOUR PARTNER/SPOUSE WILL NEED TO PRINT THIS PAGE AND TAKE IT WITH HIM/HER TO THEIR  
LOCAL POLICE/RCMP STATION\*\***



**Big Sisters  
of BC Lower Mainland**

34 E. 12th Avenue, Vancouver, BC V5T 2G5  
Phone: 604.873.4525 Fax: 604.873.2122

To Whom It May Concern:

\_\_\_\_\_ is the partner/spouse of \_\_\_\_\_ who has applied to be a volunteer at Big Sisters of BC Lower Mainland. As a volunteer with this non-profit organization, this volunteer will receive no remuneration for their services at Big Sisters. Big Sisters is a non-profit organization committed to enhancing the confidence, self-esteem and well-being of girls, ages 7 through 17 years, through supportive friendships with caring women on a volunteer basis.

We would appreciate your assistance in providing the Criminal Record Check (including a Vulnerable Sector Search) for this applicant's partner/spouse at either the volunteer rate or for free, as this is a volunteer position with our agency.

If you require further information or documentation, please call me at 604-873-4525 ext. 303. Your consideration of this is greatly appreciated.

Sincerely,

A handwritten signature in blue ink, appearing to read "Jennifer Rentz".

Jennifer Rentz  
Manager of Programs & Services