



Aim High Mentoring Permission Form



Student's Name: _____ Birthdate: _____ Gender: _____ Grade: _____

Student lives with (check all that apply):

- Mother Father Grandmother Grandfather Foster Parent
- Stepmother Stepfather Sisters (# __) Brothers (# __)
- Other _____

Household Income: less than \$10,000 \$10,000-\$14,999 \$15,000-\$19,999 \$20,000-\$24,999 \$25,000-\$29,999
 \$30,000-\$34,999 \$35,000-\$39,999 Over \$39,999

Tell us about your child's social, behavioral, educational and developmental strengths or weaknesses: _____

Does this student have a parent that is deployed in the military? Yes _____ No _____

Is there a significant adult to this child that is incarcerated? _____

How do you hope a mentor will help this student? _____

Has this child been involved with the Juvenile Justice System? Yes _____ No _____

Receives Free or Reduced lunch? Yes _____ No _____

Will you accept a mentor for your child who is lesbian, gay or bisexual? Yes _____ No _____

Would you prefer the mentor to be a certain religion? Yes _____ No _____ If Yes, what religion? _____

Would you accept a mentor of any religion? Yes _____ No _____

Would you accept a mentor who is atheist or agnostic? Yes _____ No _____

I give permission for my child, to participate in Sheffield City Schools' "Aim High" mentoring program. I understand that my child will be matched with an adult volunteer or a high school student who will meet with my child for 30 minutes to 1 hour a week at my child's school. Any other "one on one" contact between my child and the volunteer mentor, except for planned group activities, is not allowed. I understand that my child will receive Child Safety Training during his/her interview with the Mentoring Coordinator. I should call the Mentoring Coordinator if I want to meet my child's volunteer, before he/she is matched. I give my permission for the Mentoring Coordinator to exchange information to/from school officials and/or Riverbend Counselor (if applicable) concerning my child.

What is your relation to the student? _____

Date X _____
Parent/Guardian Signature

PUBLICITY RELEASE

In order that we may recruit Big Brothers and Big Sisters, we often do publicity with the children enrolled in our program. This publicity may include, but not necessarily: television, slide shows, photographs, website, Facebook, public appearances, etc. It is not necessary that you sign the statement below. It will not affect your child's eligibility for service. I hereby give my permission for my child's name and picture to appear in any advertisement or publicity for Big Brothers Big Sisters of the Shoals, Inc.

Date X _____
Parent/ Guardian Signature

Telephone Consumer Protection Act Consent

I authorize that Big Brothers Big Sisters of the Shoals, Inc. has my consent to contact me regarding any matter related to the Big Brothers Big Sisters program, agency activities and events, and any other informational notices deemed important by the agency at the current or any future number that I provide for my landline, cellular phone or other wireless device using automated telephone dialing equipment or artificial or pre-recorded voice or text messages. I understand that I do not have to agree to receive autodialed calls or automated text messages to apply or enroll but that if I don't, I may fail to receive valuable information. I understand that it is my responsibility to notify the agency if there is a change or disruption in any of the phone numbers provided.

Date X _____
Parent/Guardian Signature