



# Big Pals - Little Pals

of Greater Columbus

## BIG PAL APPLICATION

Thank you for your interest in becoming a Big Pal. Please submit completed application via email to **bigpalslittlepals@gmail.com** or hand deliver or mail to **1260 27th Avenue, Suite 101, Columbus, NE 68601**. Along with this application, you will need to submit a copy of your driver's license and most recent auto insurance card.

All applications will be given equal consideration regardless of race, age, sex, disability, marital status, sexual orientation, religion or national origin.

### GENERAL INFORMATION

First Name:	Middle Name:	Last Name:	Preferred Name:	
Preferred Phone Number:		Secondary Phone Number:	Is it okay to text you? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Home Address:		City:	State:	Zip:
E-mail Address:		Date of Birth:	Gender:	Marital Status:
Race/Ethnicity: (check all that apply) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Other <input type="checkbox"/> Prefer not to disclose				
Employer:	Job Title:		Work Hours:	
Highest Level of Education:		Are you a student at this time? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what school? What are you studying?		
Area of Study:				
Do you have current or past military experience? <input type="checkbox"/> Yes <input type="checkbox"/> No			If yes, Dates of Service:	
Do you have a current and valid driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No		Do you have a vehicle? <input type="checkbox"/> Yes <input type="checkbox"/> No  Do you have valid insurance that meets or exceeds state required minimum? <input type="checkbox"/> Yes <input type="checkbox"/> No		

## REFERENCE INFORMATION

Please list information for at least three references below including:

1. Your spouse or domestic partner (i.e., if you live with a significant other/ girlfriend/boyfriend) OR a family member, if you do not have a spouse, partner, or significant other);
2. Current or former employer or co-worker you have known for at least one year. If you are a student, a staff member at your school. If you are not working and not in school, a personal reference; AND
3. A friend or neighbor you have known for at least two years.

<b>Spouse/Partner's name:</b>		Family member name (if no spouse/partner):		
Email ( <i>BPLP's preferred method for contacting references</i> ):				
Address:		City:	State:	Zip:
Phone:		Any notes or comments?		
<b>Employer or Co-worker</b> or school staff (if you are a student), or other personal reference (if not working/in school):				
Email ( <i>BPLP's preferred method for contacting references</i> ):				
Address:		City:	State:	Zip:
Phone:		Any notes or comments?		
<b>Friend, neighbor, or other personal reference</b> that you have known for at least 2 years:				
Email ( <i>BPLP's preferred method for contacting references</i> ):				
Address:		City:	State:	Zip:
Phone:		Any notes or comments?		

**In addition to your personal references, BPLP requires references from all youth serving organizations at which you have worked or volunteered in the past. Please list additional on separate page, if needed.**

Organization name:		Direct supervisor:		
Email ( <i>BPLP's preferred method for contacting references</i> ):				
Address:		City:	State:	Zip:
Phone:		Any notes or comments?		
Dates of involvement/employment:				
Reason for leaving:				

# BIG PAL INTEREST INVENTORY

We want to get to know you and make sure your Little Pal likes the same kind of things you do! Next to each item on the list, put an "X" in the box to mark if you like it, want to try it or don't like it. If there is something you really like that isn't on the list, feel free to write it below.

	I LIKE THIS	I WANT TO TRY THIS	I DON'T LIKE THIS		I LIKE THIS	I WANT TO TRY THIS	I DON'T LIKE THIS
<b>Acting, theater</b>				<b>Knitting, sewing</b>			
<b>Animals, pets</b>				<b>Legos, building things</b>			
<b>Archery</b>				<b>Math</b>			
<b>Art, drawing, painting</b>				<b>Mini-golf</b>			
<b>Basketball</b>				<b>Music</b>			
<b>Board games</b>				<b>Photography</b>			
<b>Boating</b>				<b>Reading</b>			
<b>Cars</b>				<b>Riding bikes</b>			
<b>Cooking</b>				<b>Running, jogging</b>			
<b>Craft projects</b>				<b>Science</b>			
<b>Dancing</b>				<b>Scrapbooking</b>			
<b>Exercising</b>				<b>Shopping</b>			
<b>Fishing</b>				<b>Swimming</b>			
<b>Football</b>				<b>Tennis</b>			
<b>Gardening</b>				<b>Traveling, visiting new places</b>			
<b>Going to the park</b>				<b>Trying new foods</b>			
<b>Going to sporting events</b>				<b>Video games</b>			
<b>Going to plays, musicals</b>				<b>Volunteering</b>			
<b>Golf</b>				<b>Watching TV, movies</b>			
<b>Hiking</b>				<b>Woodworking</b>			
<b>History</b>				<b>Writing</b>			
<b>Hunting</b>				<b>Yoga</b>			

What do you like to do that isn't on this list? \_\_\_\_\_

**BIG PALS - LITTLE PALS**

**Association of Greater Columbus**

Karmen Thompson, Executive Director  
1260 27<sup>th</sup> Avenue, Suite 101 Columbus, NE 68601  
402-910-8334 bigpalslittlepals@gmail.com www.bigpals.org

**AUTHORITY FOR RELEASE OF INFORMATION**

Out of state, local, county and state police departments: State of Nebraska and other states resided:

\_\_\_\_\_.

I hereby authorize the Columbus Police Department to release to Big Pals-Little Pals Association of Greater Columbus any record or information concerning my driving record and any crime committed or alleged to have been committed by me. This includes, but is not limited to: arrests, records and conviction date.

I hereby release the Big Pals-Little Pals Association of Greater Columbus as custodian of such records, including all officers, employees or related personnel, both individually and collectively, from any and all liability for damages of any type which may at anytime result to me, my heirs, family or associates because of compliance with this authorization.

Printed name:		
Other names previously used, including nicknames and maiden name:		
Addresses within the last 5 years:		
Date of birth:	Social security number:	Driver's license number:

Signature \_\_\_\_\_ Date \_\_\_\_\_

**NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES  
 DIVISION OF CHILDREN AND FAMILY SERVICES  
 AGENCY REQUEST FOR INFORMATION FROM THE NEBRASKA ADULT AND  
 CHILD ABUSE AND NEGLECT REGISTER/REGISTRY**

Nebraska DHHS requires all volunteer applicants to submit their requests via an online portal. Shortly after the interview/orientation meeting, OneSource Background Check will send you an email with a link to the portal to applicants and, from there, applicants must enter their information and submit the request. Big Pals-Little Pals will cover the costs for this registry check.

Is the email address listed on your application form the best email address for BPLP to send the link to the DHHS portal?

Yes  No

If no, please provide the email address you'd prefer to use: \_\_\_\_\_

**ROOMMATE/FAMILY MEMBER CRIMINAL HISTORY RECORD REQUESTS**

As of May 20, 2019, BPLP will be completing criminal history record requests on all adults (18 years or older) who reside with Big Pal applicants to ensure the Big Pal's home is a safe environment for a child to visit. In order to complete the online criminal history record request through the NE State Patrol, the minimum required information includes the individual's name, date of birth, race and gender. Costs for this check are covered by BPLP.

Are there other people living in your household?

If yes, provide name, date of birth and their relationship to you.

If they are 18 years or older, please also include their race and gender so we can complete the Nebraska State Patrol Criminal History Record Request.

Name:	Relationship:	DOB:	Race:	Gender:
Name:	Relationship:	DOB:	Race:	Gender:
Name:	Relationship:	DOB:	Race:	Gender:
Name:	Relationship:	DOB:	Race:	Gender: