

Memorandum



Date: April 26, 2013
To: Department Directors
From: Carlos A. Gimenez
Mayor
Subject: Miami-Dade County Big Brothers Big Sisters Partnership

A handwritten signature in cursive script, appearing to read "Carlos A. Gimenez".

The foundation for our future success is an educated workforce capable of filling the jobs that we hope to create in Miami-Dade County. There are already plenty of talented young people right here who can fill those ranks, and we want to keep them here after they graduate. They are the products of local schools and they have a lot to offer. With that goal in mind, we are launching "Actively Investing in Miami: An Initiative to Educate, Engage, and Retain Our Future Workforce" (the A.I.M. Initiative).

As part of the A.I.M. Initiative, I am pleased to announce Miami-Dade County's new partnership with Big Brothers Big Sisters (BBBS) of Greater Miami. Big Brothers and Big Sisters is the premier mentoring organization in South Florida helping thousands of children each year through professionally supported, one-on-one relationships with caring adult volunteers.

Through the Big Brothers and Big Sisters Mentoring Resource Center, the County will participate in a School-to-Work Program that will transport students to downtown County facilities once a month for worksite visits with their "Bigs."

We are inviting County Employees located in County facilities in and around the Stephen P. Clark Government Center (Overtown Transit Village, Main Library, Hickman Building, etc.) to become a Big Brother or Big Sister and participate in this most rewarding program. For a few hours each month, employees will be able to mentor a student providing the invaluable gift of meaningful work experiences. We anticipate providing 25 to 50 Miami-Dade County Public School students with this opportunity and are looking to engage the same number of mentor employees.

Attached please find the Big Brothers Big Sisters Volunteer Application form. Human Resources will work through the Department Personnel Representative (DPRs) to coordinate this effort in identifying a mentor from your management team. More information regarding Big Brothers and Big Sisters may be found at <http://www.wementor.org/volunteers.asp>.

BBBS will hold two orientation sessions on Tuesday, May 14, 2013 at 111 NW 1 Street, 18th floor. The first session will be from 9:30 - 11:30 a.m. and the second from 2:30- 4:00p.m. Additional information will be sent directly to the DPRs to facilitate this effort.

If you have any questions, please contact Internal Services Department, Human Resources at (305) 375-3346 or mentoring@miamidade.gov.

- c: Honorable Chairwoman Rebeca Sosa and Members, Board of County Commissioners
- Honorable Harvey Ruvin, Clerk of Courts
- Honorable Carlos Lopez Cantera, Property Appraiser
- Office of the Mayor Senior Staff
- Lester Sola, Director, Internal Services Department
- Internal Services Department Human Resources Recruitment and Internal Placement Staff
- Department Personnel Representatives



701 S.W. 27th Avenue, Suite 800, Miami, Florida 33135

Phone (305) 644-0066 Fax (305) 649-6358

Web Address: www.wementor.org

E-mail: info@bbbsmiami.org

VOLUNTEER APPLICATION- Miami Dade

(Please FAX this application to us prior to interview – or bring it to your interview)

First Name:		Middle Name:		Last Name:		Date of Birth:	
Home Address:				City:		State:	Zip:
Email:			Home Ph #:		Work Ph #:		Cell Ph #:
Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>		Social Security # (required): — —		Please check: <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Caucasian <input type="checkbox"/> Multiracial <input type="checkbox"/> Other _____			
Occupation: Student <input type="checkbox"/> Unemployed <input type="checkbox"/> Employee <input type="checkbox"/> Self Employed <input type="checkbox"/> Other <input type="checkbox"/>				School Name:		Employer:	
Employment Address:				City:		State:	Zip:
Position:		Work Hours:		How Long Employed:		Can We Contact You At Work: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you have a driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No		State of issue:		Driver's license #:			Expiration date:

I understand that:

- 1) The references I list may be contacted by mail, telephone, or email;
- 2) This application in no way obligates me to perform any volunteer services;
- 3) The information I provide may be used to conduct a background check, to include driving records check, criminal background check, and/or other records where required by local, state, or federal law for volunteers working with youth;
- 4) BBBS is not obligated to match me with a youth;
- 5) As part of the enrollment process, I will be asked to provide additional personal information prior to receiving any recommendations for assignment.
- 6) Possession of a driver's license is not a requirement to participate in any program, but is required if I will be transporting a youth in any vehicle I am operating.

Signature

Date

Applicant Name _____

REFERENCES

Please **type or print clearly** the following information requested for all four references:

- 1) Your current or past **employer** who has known you for **at least 1 year**;
- 2) A **co-worker or friend** who has known you for **at least 2 years**; and
- 3) A **family member or friend** who has known you for **at least 3 years**.
- 4) A **close family member** (spouse/domestic partner) **or friend** who has known you for **at least 4 years**.

*Providing information regarding 2 references is required. Providing a third or fourth reference is optional, and it will expedite your application process.

1. Employer (or school if student):		Supervisor's Name (or teacher if a student): (has known you at least 1 year)
Day Phone #:	Fax #:	Email (print clearly):
2. Coworker or Friend who has known you at least 2 years:		
Day Phone #:	Fax #:	Email (print clearly):
3. Family Member/Friend who has known you at least 3 years:		
Day Phone #:	Fax #:	Email (print clearly):
4. Spouse/Domestic Partner/Guardian/Friend who has known you at least 4 years:		
Day Phone #:	Fax #:	Email (print clearly):
Have you ever applied before to be a Big Brother or Big Sister? Yes <input type="checkbox"/> No <input type="checkbox"/>		Where and When:
At this time, which of our programs are you most interested in? <input type="checkbox"/> Community <input checked="" type="checkbox"/> School <input type="checkbox"/> Other Brentwood		

WAIVER

I, _____, hereby waive any privacy or other privilege I might have and authorize the State of Florida Department of Law Enforcement to check my name in its criminal records, and if there are any entries therein to copy such and deliver copies of any such entries or other references to Big Brothers Big Sisters of Greater Miami. This waiver is executed with full knowledge and understanding that the information is for the use of Big Brothers Big Sisters of Greater Miami in evaluating my application for membership in the organization, particularly my worthiness of character as an influence on young persons I may come into contact with as a member of that organization.

(Signature)

(Date)

If applicable, please denote your maiden (birth) name: _____