

PUEBLO CITY-COUNTY LIBRARY DISTRICT
VOLUNTEER APPLICATION

Please return to: Volunteer Coordinator,
100 E. Abriendo Ave., Pueblo, CO. 81004-4232

Please print clearly and complete all sections. Applicants must be at least 16 years of age.

NAME: Adam N. Casados DATE: 8-4-16

ADDRESS: 1416 E RIVER^{ST.} CITY: PUEBLO STATE: CO ZIP: 81001

HOME PHONE: (719) 281-4442 WORK PHONE: _____ EMAIL: _____

EDUCATION:

- Elementary Certificate _____ Master's Degree _____
 Middle School Associate's Degree _____ PhD _____
 High School Bachelor's Degree _____ Other _____

SPECIAL QUALIFICATIONS OR SKILLS: Get alot of customer SERVICE
work under me so working or being around various types
of people isn't a problem.

WORK EXPERIENCE:

Last or present position:

Employer Sugar Creek packing. Position PACKER City & State W.C.H / OHIO

Previous position:

Employer Burger King Position CREW City & State PUEBLO / Colorado

REFERENCES:

Name SELENIA Raygoza Phone 719-281-5787 Relationship WORK

Name DEBRA SENA Phone 719-252-6764 Relationship FRIEND

Name GINO Phone 719-299-9230 Relationship WORK BOSS

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE: _____

If yes please explain TRAFFIC tickets / Felony - criminal trespassing in 2010

IN CASE OF EMERGENCY PLEASE CONTACT: Joltra Casados

PHONE: 719-281-4442 RELATIONSHIP: Grand father

AVAILABILITY: Library hours are M-Th 9 am-9 pm, Fri & Sat 9 am-6 pm and Sun(Rawlings only) 1 pm-5 pm

Please check the days and times you are available to volunteer:

	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.
9am-1pm	X	X	X	X	X	X	X
1pm-5pm	X	X	X	X	X	X	X
5pm-9pm	X	X	X	X	X	X	X

How many hours are you interested in volunteering? AS MANY AS YOU NEED ME per week / per month

How long do you wish to volunteer at the library?

- Less than a month 3-6 months More than six months For special events

Library Location Preference (check all that apply)

- Rawlings Lamb Barkman Pueblo West Other _____

- Greenhorn Valley Giodone Patrick Lucero Homebound

What type of work would you enjoy doing at the library? Honestly whatever you need help with.

Please sign below when you have read and understood all statements.

I certify that all statements made in this volunteer application are true and correct, and have been given voluntarily. I understand that this information may be disclosed to any party with legal and proper interest, and I release Pueblo City-County Library District from any liability for supplying such information.

I understand that the Pueblo City-County Library District reserves the right to screen volunteers and will not accept as a volunteer anyone who would jeopardize any aspect of library service or safety of library staff and patrons.

I understand that if I miss my scheduled date and time of service without prior notification, my volunteer opportunity may be terminated.

I understand that I will not be paid for my services as a volunteer and I am giving my time freely to the Pueblo City-County Library District.

I understand that by volunteering, I am not guaranteed any special consideration for any future permanent job positions with the Pueblo City-County Library District.

APPLICANT SIGNATURE:  DATE: 8-4-16

LIBRARY OFFICE USE ONLY

DATE APPLICATION RECEIVED: _____ INTERVIEW DATE: _____

INTERVIEW COMMENTS: _____

VOLUNTEER ASSIGNMENT: _____