

TEEN TEAM APPLICATION

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

Com

Please fill out the following: Name: Morion Schmidt Date: 07/22/16 Address: 1807 Lucas Ave. City: Pueblo State: 0. Zip: 8/005 Phone: 405 314-1523 Email: Janiceg cod night may nacd 510 gmail School: Cendral high school Age: 14								
School:	entroll high	it school		Janes	von myn	Age: 14	as to amen	
Are you volunteering for school credit? No If so, hours needed								
Check th	e location	(s) where	you woul	d like to v	olunteer:			
RawlingsBarkmanLambPueblo WestGiodone								
		Greenh		·				
Please ch			mes you a		le to volu	nteer:	8	
	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.	
9am-1pm		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		~	X	X		
1pm-5pm 5pm-9pm	X	X		-	X	Α		
Name Misty McPike Phone 719 252-5863								
Emergen	cy Inform	ation:						
PHONE: 405-314-1523 RELATIONSHIP: Mother (grandmother)								
PHONE:_	H02-	314-1	573 REL	ATIONSHI	P: Noth	un Cara	(restormation	
Parent si	gnature r	equired b	elow:					
I <u>Can</u> permission	to volunte	er for the P	d give nueblo City-	ny teen <u>C</u> County Lib	lanian rary Distric	n Ich	midt	
Jan	ice 1	Now	nand		7-	77-16		
Signature of parent or guardian						Date		

Please answer the following questions:

1. Why do you want to volunteer at the library and what do you hope to gain from this experience?

I want to volunteer so I can get out of the house, be more social, and meet new people.

2. Please list your hobbies, interests, clubs or other information you would like us to know about you:

My interests include ROTC, and playing the violin, viola, and trumpetfof school.

I also do photography on my own time.

3. How do you use the library? (homework, information, recreational reading, etc.)?

I mostly use it for homework and reading.

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 customers.

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: Mich Schwidt DATE: 7-22-16