

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 18 years of age.

NAME: Alba S Alderete DATE: 2-20-18

ADDRESS: 1116 E 13 ST CITY: Pueblo STATE: CO ZIP: 81001
HOW LONG AT THIS ADDRESS _____ IF LESS THAN 7 YEARS LIST PREVIOUS
ADDRESS(ES) WITH DATES. 10-1996

HOME PHONE: 719-242-6470 WORK PHONE: _____ EMAIL: alderete.alba@yahoo.com
EDUCATION:

- | | | |
|---|---|--|
| <input type="checkbox"/> Elementary | <input type="checkbox"/> Certificate _____ | <input type="checkbox"/> Master's Degree _____ |
| <input type="checkbox"/> Middle School | <input type="checkbox"/> Associate's Degree _____ | <input type="checkbox"/> PhD _____ |
| <input checked="" type="checkbox"/> High School | <input type="checkbox"/> Bachelor's Degree _____ | <input type="checkbox"/> Other _____ |

SPECIAL QUALIFICATIONS OR SKILLS: —

WORK EXPERIENCE:

Last or present position:

Employer S R D A Position VOLUNTEER City & State Pueblo, CO

Previous position:

Employer _____ Position _____ City & State _____

REFERENCES:

Name Steve Vigil Phone 719-369-7475 Relationship son

Name Maria Varela Phone 719-564-8628 Relationship friend

Name _____ Phone _____ Relationship _____

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE: _____

If yes please explain _____

IN CASE OF EMERGENCY PLEASE CONTACT: Steve Vigil

PHONE: 369-7475 RELATIONSHIP: son

Tax Work off Program

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 | 2-5 | 2-5 | 2-5 | 2-5 | | | |
| 1pm-5pm | | | | | | | |
| 5pm-9pm | | | | | | | |

How many hours are you interested in volunteering? 23 per week per month

Are you fulfilling a community service requirement? yes If so, what is your deadline? august 31st

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? any kind
tax work of program.

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: alva A aldrete **DATE:** 2-20-18

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|---|-----------------------|
| LIBRARY OFFICE USE ONLY | |
| DATE APPLICATION RECEIVED: <u>2-20-18</u> | INTERVIEW DATE: _____ |
| INTERVIEW COMMENTS: _____ | |
| VOLUNTEER ASSIGNMENT: _____ | |