

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: Alexan	ndra Azner	DATE: 12-3-17
	DDRESS CITY: Pueblo g DDRESS Year ADDRESS(ES) IF NOT LONGER THAN 7	
LIST PREVIOUS A	ADDRESS(ES) IF NOT LONGER THAN 7	YEARS
	Il Blud Denver 10 80211	
HOME PHONE: 7	720-289-9110 work phone: 303-245-	3224 EMAIL: alexandra. aznare
EDUCATION:		gmail.
□ Elementary	□ Certificate	⊡Master's Degree
□Middle School	□Associate's Degree	□PhD
□High School	□Bachelor's Degree	□Other
SPECIAL QUALIF	TICATIONS OR SKILLS: Spenish Sp	ealor
or Lond Quilling	Territorio di Sitterio.	(Me)
WORK EXPERIEN		
Employer 7 11 an Ce	France Position 110 (C. Lead	City & State (50101)
Previous position:	. 21697	
Employer	Position	City & State
REFERENCES:		
Name Sherry St	Phone 303-681-6667 R	delationship colleague
Name Leslie Azn	Phone 303-888-9506 R Johnson Phone 970-209-7358 R	delationship mether
Name Arlmey	Johnson Phone 970-209-7358 R	delationship Angel
		,
HAVE YOU EVER	BEEN CONVICTED OF A CRIMINAL OFF	FENSE: \(\subseteq \tilde{\chi} \)
If yes please explain		
IN CASE OF EMI	ERGENCY PLEASE CONTACT:	ico Sciendra
PHONE: 720	3-725-6702 RELATIONSHI	P: husband

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.			
1pm-5pm			
How many hours are you interested in volunteering? 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 対Homebound			
What type of work would you enjoy doing at the library?			
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: \(\frac{1}{2} - 3 - 1\)			
LIBRARY OFFICE USE ONLY			
DATE APPLICATION RECEIVED: INTERVIEW DATE:			
INTERVIEW COMMENTS:			
VOLUNTEER ASSIGNMENT:			