

TEEN TEAM APPLICATION

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

Please fill out the following:								
Name: Alsa Nightingale					Date: <u>/</u> _/			
Address:	(0)21 PP	in PAROPI	*					
City:	Phlo			Stat	te: () Zi	p: 8/00.	5	
Phone:	119-247-	7094 Em	ail: USMI	antinocie1	Damail	COM		
City: Prehlo State: CO Zip: 81005 Phone: 719-247-7094 Email: Isnightingare Dogmail Com School: Suth High School Age: 15								
Are you volunteering for school credit? If so, hours needed								
Check the location(s) where you would like to volunteer:								
RawlingsBarkmanLambPueblo WestGiodone								
Patrick Lucero Greenhorn Valley								
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Please CI	Mon.	Tues.	mes you a	Thurs.			0	
9am-1pm	Mon.	Tues.	wed.	Thurs.	Fri.	Sat.	Sun.	
1pm-5pm		2	Ŷ	X	\rightarrow	\rightarrow		
5pm-9pm	Ż.	X	X	X	×	×	×	
List one adult not related to you, whom we can contact for a reference. Name Hustin Sunches Phone 70-415-7218 Emergency Information:								
IN CASE OF EMERGENCY PLEASE CONTACT: Cathy Mightingale								
					}			
PHONE: 719-251-0218 RELATIONSHIP: MOthor								
	gnature r							
I CAMU MGHINGLE give my teen MISA Mightingale permission to volunteer for the Pueblo City-County Library District.								
permission	to volunte	er tor the F	ueblo City-	County Lib	rary Distric	et.		
Cathy Mitgele (e-14-16								
Signature of pa	rent or guardia	n			Date	93		

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? \ \www. \ww. \www. \ww. \www. \ww. \www. \ww. \www. \www. \www. \www. \www. \ww. \ww. \ww. \ww. \www. \www. \www. \www. \www. \www. \www. \www. \ww. \ww. \ww. \ww. \ww. \ww

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

White is to music, helping others

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

Homework, information, 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: Who I follow DATE: 6-14-16