



# 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: Anthony E. Valdez DATE: 1/29/19

ADDRESS: 11 Caledonia CITY: Pueblo STATE: CO ZIP: 81001

HOW LONG AT THIS ADDRESS 5 years IF LESS THAN 7 YEARS LIST PREVIOUS ADDRESS(ES) WITH DATES.

1504 Bonforte, 2103 Rangview

HOME PHONE: 719.671.2426 WORK PHONE: \_\_\_\_\_ EMAIL: tvaldez39@hotmail.com

- EDUCATION:
- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Elementary             | <input type="checkbox"/> Certificate                   | <input type="checkbox"/> Master's Degree |
| <input type="checkbox"/> Middle School          | <input checked="" 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 SRDA Position Transportation Scheduler City & State Pueblo CO

Previous position:  
Employer School Dist. # 60 Position Director Purchasing City & State Pueblo CO

### REFERENCES:

Name Michael Robbin Phone 719-250-1856 Relationship friend

Name Cindy Muckel Phone 719-252-0584 Relationship friend

Name Deni Steel Phone \_\_\_\_\_ Relationship friend

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE: \_\_\_\_\_

If yes please explain No.

IN CASE OF EMERGENCY PLEASE CONTACT: Jena Reichelt MD

PHONE: 719.671.2448 RELATIONSHIP: daughter

**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							
1pm-5pm							
5pm-9pm							

How many hours are you interested in volunteering? \_\_\_\_\_ per week / per month

Are you fulfilling a community service requirement? \_\_\_\_\_ If so, what is your deadline? \_\_\_\_\_

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

**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: [Signature] DATE: 1/29/19

**LIBRARY OFFICE USE ONLY**

DATE APPLICATION RECEIVED: \_\_\_\_\_ INTERVIEW DATE: \_\_\_\_\_

INTERVIEW COMMENTS: \_\_\_\_\_

VOLUNTEER ASSIGNMENT: \_\_\_\_\_