

PUEBLO CITY-COUNTY LIBRARY

Ideas • Imagination • Information

TEEN TEAM APPLICATION

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

Please fill out the following:

Name: Ayiana Kelly Date: 5/17/18
Address: 1133 Brown Ave.
City: Pueblo State: CO Zip: 81004
Phone: (719)-557-1019 Email: ayiana.kelly.2001@gmail.com
School: Pueblo South High School Age: 16

Are you volunteering for school credit? Yes If so, hours needed 80

Check the location(s) where you would like to volunteer:

Rawlings Barkman Lamb Pueblo West Giodone
 Patrick Lucero Greenhorn Valley

Please check the days and times you are available to volunteer:

	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.
9am-1pm							
1pm-5pm							
5pm-9pm					✓		

List one adult not related to you, whom we can contact for a reference.

Name Debra Hand Phone 719-586-8726 (work)

Emergency Information:

IN CASE OF EMERGENCY PLEASE CONTACT: Riki Aragon
PHONE: 719-289-5662 RELATIONSHIP: Mother

Parent signature required below:

I Riki Aragon give my teen Ayiana Kelly
permission to volunteer for the Pueblo City-County Library District.

Riki Aragon
Signature of parent or guardian

5-31-18
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 earn volunteer hours, and to gain a reliable reference for future job opportunities*
2. Please list your hobbies, interests, clubs or other information you would like us to know about you: *Reading (manga, ~~y~~ young adult fantasy novels), Cooking, Guitar lessons, Creative writing, Sketching*
3. How do you use the library? (homework, information, recreational reading, etc.)? *Recreational reading, attend free community classes*

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: *Ayisna K. Kelly* DATE: *5/17/18*