

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: Brenda Terwilliger DATE: 6/11/18
ADDRESS: 5 Nake Street city: Pueblo state: 60 zip: 81005 HOW LONG AT ADDRESS LIST PREVIOUS ADDRESS(ES) IF NOT LONGER THAN 7 YEARS
20 years.
HOME PHONE: 504-8356 WORK PHONE: 353-4/91 EMAIL: westoned a gange EDUCATION: Elementary
special qualifications or skills: amazy customer Surice, reliable, helpfordepindable Friendly, lose to read ship familian with library and it's staff.
WORK EXPERIENCE: Last or present position: Employer Puthlo Pummary Position Medical City & State Puthlo, Co Previous position: Employer Low State Position Canick City & State Puthlo, Co
REFERENCES: Name DUNCE Vasque 2 Phone 404-1539 Relationship Fraid Name DV Marcel Juniquer Phone 544-1542 Relationship Bass Name Dunce Marcel Juniquer Phone 351-0909 Relationship Marager HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE: If yes please explain
IN CASE OF EMERGENCY PLEASE CONTACT: Mother Lydia Apolaca PHONE: 544-8354 RELATIONSHIP: Worker

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 / / / / / / / / / / / / / / / / / / /
How many hours are you interested in volunteering?
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?
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: John Levellig DATE: 6/11/18
LIBRARY OFFICE USE ONLY
DATE APPLICATION RECEIVED: INTERVIEW DATE:
INTERVIEW COMMENTS:
VOLUNTEER ASSIGNMENT: