

## TEEN TEAM APPLICATION

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

Please fill out the following: Name: By 1000 Souters  Date: 2 25 16							
Name: BYIONO SOUTERS					Da	te: 2 25	116
Address: 1906 Sherwood In							
City: <u>DUCDIO</u> State: <u>CO</u> Zip: 8 1005							
City: DUEDIO State: @ Zip: 8/005 Phone: 7/9) -947 - 2/92 Email: Briang Surters agmail (om							
School: SOUTH high SCHOOL Age: 17							
J							
Are you volunteering for school credit? <u>Yes</u> If so, hours needed <u>40</u>							
Check the location(s) where you would like to volunteer:							
RawlingsBarkmanLambPueblo WestGiodone							
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				V			
List one adult not related to you, whom we can contact for a reference.							
Name Shawavana White Phone (719)-281-7236							
Emergency Information:							
IN CASE OF EMERGENCY PLEASE CONTACT: Danella Wilder							
PHONE: (843)-345-8570 RELATIONSHIP: MOTHLY							
Parent signature required below:							
I Danella Wilder give my teen Briana Salters							
permission to volunteer for the Pueblo City-County Library District.							
Danella W. 2/25/16							
Signature of parent or guardian 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?

more outside envolvement with the community and also more social skills.

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

I love to read, write, listen to music.

I aum in DECA at south nigh school

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

Home work, reading, and to use the computers

## 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: <u>Bruano daulers</u> DATE: <u>2</u> 25/16