



# 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: Sheryl Trujillo DATE: 9-7-18

ADDRESS: 24936 Hanley Rd CITY: Pueblo STATE: Co ZIP: 81006

HOW LONG AT ADDRESS 6  
LIST PREVIOUS ADDRESS(ES) IF NOT LONGER THAN 7 YEARS  
1654 Clisdale Ln 81006

HOME PHONE: 719-251-1714 WORK PHONE: \_\_\_\_\_ EMAIL: strujill1@hotmail.com  
strujill1

EDUCATION:  
 Elementary  Certificate  Master's Degree  
 Middle School  Associate's Degree  PhD  
 High School  Bachelor's Degree  Other

SPECIAL QUALIFICATIONS OR SKILLS: computer

### WORK EXPERIENCE:

Last or present position:  
Employer City of Pueblo Position computer/network tech City & State Pueblo, Co <sup>32 years</sup>

Previous position:  
Employer \_\_\_\_\_ Position \_\_\_\_\_ City & State \_\_\_\_\_

### REFERENCES:

Name Leonard Trujillo Phone 250-6695 Relationship husband  
Name Danna Rasheid Phone 250-5556 Relationship sister  
Name Bruce Bruning Phone 568-7516 Relationship friend

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE: no

If yes please explain \_\_\_\_\_

IN CASE OF EMERGENCY PLEASE CONTACT: Leonard Trujillo  
PHONE: 250-6695 RELATIONSHIP: husband

**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

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? Therapy, Pkg 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 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:** Angi Taylor      **DATE:** 9-7-18

**LIBRARY OFFICE USE ONLY**

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

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

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