

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: Citalli Molina Date: 2-26-18
 Address: 2638 E. 13th
 City: Pueblo State: CO Zip: 81001
 Phone: (719) 250-4151 Email: _____
 School: East High School Age: 16

What position are you applying for? _____

Are you volunteering for school credit? yes If so, hours needed 16

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

Rawlings Barkman Lamb White Satellite

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

	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.
9am-1pm						<input checked="" type="checkbox"/>	
1pm-5pm							
5pm-9pm	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		

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

Name Veronica Molina Phone (719) 250-4151

Emergency Information:

IN CASE OF EMERGENCY PLEASE CONTACT: My aunt Mary Molina
 PHONE: (719) 250-8526 RELATIONSHIP: Aunt

If you are under 16, please have a parent sign below:

I Veronica Molina give my teen Citalli Molina permission to volunteer for the Pueblo City-County Library District.

Veronica Molina _____ Date 2-26-18
 Signature of parent or guardian

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?

Learning new things, and helping out my community.

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

I like music, and soccer is a sport I really like. I also speak 2 languages

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

I come every often to do homework and projects.

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: _____

Citlali Molina

DATE: _____

2-26-18