

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.

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NAME: Cons	uello A	pita	Paye	w.	DATE: _	2/24/2018
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LIST PREVIOUS	ADDRESS(E	S) IF N	OT LUNGER	l THAN 7 x	YEARS	
HOME PHONE: , EDUCATION:	252-079	7ZWOR	RK PHONE:_	NA	EMAIL:	NA
□ Elementary	□ Certificate				□Master's Deg	ree
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⊠High School					□Other	
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WORK EXPERIE	ENCE:					
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Previous position:	tern ware	house				ā.
	1 d		Position		City & Stat	e
Employer	7,				Oity a suit	e
REFERENCES:						
Name Kateri	Medanic	<u></u> <a>ん <a>Phone	253-	2301 R	elationship 🚽	riend.
						friend.
Name Louis	C.	Phone	248-	7289 R	elationship	Sriend.
HAVE YOU EVE	R BEEN CON	VICTEL	OF A CRIM	INAL OFF	ENSE:	o .
If yes please explain				1,21,1		
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IN CASE OF E	MERGENCY	PLEASE	CONTACT:	Melis	sa MI	yers.
PHONE: 565	7 - 9979	4	REL	ATIONSHI	P: Dauge	yers. Inter

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.								
Mon. Thes. Wed. Thurs. Fri. Sat. Sun.	AVAILABILITY: Lil	orary hours a	are M-Th 9 a	m-9 pm, Fri	& Sat 9 am	-6 pm and S	un(Rawlings o	nly) 1 pm-5 pm
Sam-sym Sym-sym Sym-	Please check the days	and times y	ou are avail	lable to vol	unteer:			
1981-99m			Wed.		Fri.	Sat.	Sun.	
How many hours are you interested in volunteering?	1pm-5pm		, , , , , , , , , , , , , , , , , , ,		1-			
Library Location Preference (check all that apply) Rawlings Lamb Barkman Pueblo West Other		ou interest	ed in volunt	teering? _	5	per week	/ per month	
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 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. It 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. It 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. It 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:					months	□For spec	cial events	
What type of work would you enjoy doing at the library? Putting Books away on selves. Anything Books away on selves. 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 stand 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: Cansuallo Anda Payer DATE: Afaloso SIL LIBRARY OFFICE USE ONLY DATE APPLICATION RECEIVED: INTERVIEW DATE: INTERVIEW COMMENTS:					□ Other		Ý	
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