## PUEBLO CITY-COUNTY LIBRARY Ideas Imagination Information

## 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. DATE: 5-20-18 Brambleward CITY: Pueblo STATE: CO ZIP: 8/005 ADDRESS: 40 HOW LONG AT ADDRESS LIST PREVIOUS ADDRESS(ES) IF NOT LONGER THAN 7 YEARS HOME PHONE: 719-564-9464 WORK PHONE: \_\_\_\_\_\_ EMAIL: \_\_\_\_\_ **EDUCATION:** □ Certificate\_\_\_ □ Elementary \_\_\_\_\_ □Master's Degree\_ □Middle School □Associate's Degree \_\_\_\_\_ □PhD \_\_\_\_ High School □Bachelor's Degree □Other\_\_\_\_ SPECIAL QUALIFICATIONS OR SKILLS: WORK EXPERIENCE: Last or present position: Employer\_\_\_\_\_Position\_\_\_\_\_City & State Previous position: Employer\_\_\_\_\_\_Position\_\_\_\_\_City & State REFERENCES: Name\_\_\_\_\_Phone\_\_\_\_\_Relationship\_\_\_\_ Name Phone Relationship Phone\_\_\_\_\_\_Relationship\_\_\_\_ Name HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE:  $N \circ$ If yes please explain \_\_\_\_\_ IN CASE OF EMERGENCY PLEASE CONTACT: De bra Nash PHONE: 719-406-9464 RELATIONSHIP: Mother

Please check the days and times you are available to volunteer:
Mon. Tues. Wed. Thurs. Fri. Sat. Sun.
9am-1pm
How many hours are you interested in volunteering? 20 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 SLamb □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.
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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:  DATE: 5 - 20 - 14  LIBRARY OFFICE USE ONLY