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

1/10/18

Please print cl	early and complete all sections. A	applicants must be at least 18 years of age.
NAME: Gabrielle	e Garaja	DATE: 2/12/19
ADDRESS: 14	ROSEWOOD LA. CITY: Puebl	STATE: CO ZIP: Oloo 5 IF LESS THAN 7 YEARS LIST PREVIOUS 16 - June 2017. 16 - June 2016
		EMAIL: gabriellen 2014@ yaho
□ Elementary	□ Certificate	
	□Associate's Degree	
√High School	□Bachelor's Degree	□Other
MADIZ EVDEDIEN	VCE.	
WORK EXPERIEN		
Last or present position		City & Chata
•	Position	City & State
Previous position:		
Employer	Position	City & State
REFERENCES:		
Name	Phone	Relationship
Name	Phone	Relationship
Name	Phone	Relationship
HAVE YOU EVER If yes please explain	BEEN CONVICTED OF A CRIMIN	IAL OFFENSE: NO.
IN CASE OF EM	ERGENCY PLEASE CONTACT: 56 -4299 relat	cionship: Mother.
S		

(over)

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 X X X 1pm-5pm X X X 5pm-9pm X X X			
How many hours are you interested in volunteering? per week / per month			
Are you fulfilling a community service requirement? If so, what is your deadline?			
How long do you wish to volunteer at the library? □Less than a month			
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? Special events. Groups. Organizing books and movies.			
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: 4 9 DATE: 2/12/19			
LIBRARY OFFICE USE ONLY			
DATE APPLICATION RECEIVED: INTERVIEW DATE:			
INTERVIEW COMMENTS:			

VOLUNTEER ASSIGNMENT: _____