

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: Jay	Lynn Montes		DATE: 8-10-16	
ADDRESS: 461	U. Spaulding Avec	CITY: Rublo Wests	TATE: <u>CO</u> ZIP: 8/007	
HOME PHONE:	WORK	PHONE:	EMAIL: Societ-jay 20 y	ahoo-com
□ Elementary □ Middle School □ High School	□ Certificate Associate's Degree □Bachelor's Degree		□Master's Degree □PhD	_
Service S	K,1/18			_ _ _
WORK EXPERIE				
Employer SKat. Previous position:	e Cety P	osition <u>SMCKbar</u> A	pont City & State Publo, CO	
Employer	P	osition	City & State	 -
Name Makayla	HOUNIS Phone TO Phone The	7-67 3955 Re	elationship Friend	— I
	BEEN CONVICTED O	F A CRIMINAL OFF	ENSE: NO	
If yes please explain _				_
	ERGENCY PLEASE CO			
PHONE:	-547-4686	RELATIONSHIP	: uranaparents	

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 a	nd times y	ou are avai	lable to vol	lunteer:						
	on.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.	-			
9am-1pm 1pm-5pm	_					_					
5pm-9pm											
How many hours	How many hours are you interested in volunteering?										
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? Anything											
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5-00-000 p		100									
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 Library District.	will not	be paid for	my services	as a volunt	eer and I am	giving my ti	me freely to the	e Pueblo City-County			
I understand that by with the Pueblo City				nteed any s	pecial consid	eration for a	any future peri	manent job positions			
APPLICANT SIG	GNAT	URE:	ayly	in Me	onten		DATE: _	3-10-16			
LIBRARY OFFICE USE ONLY											
INTERVIEW COM	MENT	S:									
VOLUNTEER ASS	IGNME	ENT:									