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.			
NAME: Harido	a Santos	DATE: 1-8-17	
ADDRESS: 45 Sufface of 15t City: Charlo Spans State: (O zip: 8007 How long at address list previous address(es) if not longer than 7 years			
HOME PHONE: EDUCATION:	:719-950 4861 work phone:	EMAIL: Maridagus laychas.com	
Elementary	□ Certificate □□	Master's Degree	
™Middle School	□Associate's Degree □	PhD	
► High School	□Bachelor's Degree □	Other	
SPECIAL QUALI	LIFICATIONS OR SKILLS:		
WORK EXPERII	ENCE:		
Employer The Br	tion: roulymor Position Turndown Affect	MCity & State Coloraddo Sprince, CO	
Previous position:		, 0,	
Employer	Position	City & State	
REFERENCES: Name Allysta Name Name Name	Fortholge Phone 785-226-331 Relation Phone 79 271-0174 Relation		
HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE:			
If yes please explain	i		
IN CASE OF E	EMERGENCY PLEASE CONTACT: Tadic	Danks	
PHONE: 254-	-571-9488 RELATIONSHIP:_	Worther	

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 1pm-5pm <			
How many hours are you interested in volunteering? 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)			
□Greenhorn Valley □Giodone □ Patrick Lucero □ Homebound			
What type of work would you enjoy doing at the library? I have whethered at a library before and To walked with distrubution, and process, and the children's center.			
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: Heull 8 DATE: 11-8-17			
LIBRARY OFFICE USE ONLY			
DATE APPLICATION RECEIVED: INTERVIEW DATE:			
INTERVIEW COMMENTS:			
VOLUNTEER ASSIGNMENT:			