

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: MAT	ina bareta	N (1	DATE:	-20-110	
ADDRESS:	Conado	_city: <u>M.golo</u> _	_STATE: (()	_zip: <u>8100</u>	<u> B</u>
HOME PHONE:	719)214-4968wor	RK PHONE:	email: <u>\$</u>	SUVIOR	hat1
EDUCATION:	1 000			Cognan.	(OI)
□ Elementary	© Certificate (5)		_ □Master's Degree_		1.1
\square Middle School	□Associate's Degree _		□PhD		
□High School	□Bachelor's Degree		Other		
SPECIAL QUALIF	CATIONS OR SKII	LS: MAY 1001 CHOOS Well (and I won	chard o	other
WORK EXPERIEN	ICE:			t	
Last or present position	<u>.</u>				
Employer ACY	Horyas	_Position Entertaine	City & State	verso (O)	
Previous position: Employer 10	X.	_Position_SOURT	City & State	mhafa	dok
REFERENCES: ,.				, 0	
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Name the Pors	Phone	M(9) 214-4944	Relationship Anon	d	
Name Gronge W	Phone	NIA	Relationship 109	d	
HAVE YOU EVER	BEEN CONVICTED	OF A CRIMINAL OI	FFENSE: LS		
If yes please explain	possession of a	OLS (2004)			
IN CASE OF EMI	ERGENCY PLEASE	CONTACT: POROL	le Fox		
PHONE: (419) 8	34-4968	RELATIONSI	HIP: Ariand		

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:					
9am-1pm Mon. Tues. Wed. Thurs. Fri. Sat. Sun. 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 Library Location Preference (check all that apply)					
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? Whatever needs to be					
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: 10-20-16					
LIBRARY OFFICE USE ONLY					
DATE APPLICATION RECEIVED: INTERVIEW DATE:					
INTERVIEW COMMENTS:					
VOLUNTEER ASSIGNMENT:					