



**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: Lea ALBO DATE: 1-19-2016  
ADDRESS: 2633 W 27th CITY: PUEBLO STATE: CO ZIP: 81003  
HOME PHONE: 719-766-5326 WORK PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**EDUCATION:**

Elementary  Certificate \_\_\_\_\_  Master's Degree \_\_\_\_\_  
 Middle School  Associate's Degree \_\_\_\_\_  PhD \_\_\_\_\_  
 High School  Bachelor's Degree \_\_\_\_\_  Other \_\_\_\_\_

**SPECIAL QUALIFICATIONS OR SKILLS:** I am good on computers and I am good with kids

**WORK EXPERIENCE:**

Last or present position:

Employer Walmart Position cart pusher City & State PUEBLO, CO

Previous position:

Employer home depot Position Sales associate City & State PUEBLO, CO

**REFERENCES:**

Name Krystal toribio Phone 719-400-5778 Relationship Personal friend

Name Pam Marquez Phone 719-321-9695 Relationship friend

Name Connie Espinosa Phone 719-320-7334 Relationship mother

**HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE:** \_\_\_\_\_

If yes please explain NO

**IN CASE OF EMERGENCY PLEASE CONTACT:** Connie Espinosa  
PHONE: 719-320-7334 RELATIONSHIP: mom

**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	X	X	X	X
1pm-5pm	X	X	X	X	X	X	X
5pm-9pm	X	X	X	X	X	X	X

How many hours are you interested in volunteering? 20hrs 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     Lamb     Barkman     Pueblo West     Other \_\_\_\_\_

Greenhorn Valley     Giodone     Patrick Lucero     Homebound

What type of work would you enjoy doing at the library? I would enjoy  
working in youth services

**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:** Lea Albo

**DATE:** 1-14-2016

**LIBRARY OFFICE USE ONLY**

DATE APPLICATION RECEIVED: \_\_\_\_\_ INTERVIEW DATE: \_\_\_\_\_

INTERVIEW COMMENTS: \_\_\_\_\_

VOLUNTEER ASSIGNMENT: \_\_\_\_\_