

TEEN TEAM APPLICATION

Please return to: Volunteer Coordinator, 100 E. Abriendo Ave., Pueblo, CO. 81004-4232

Please fill out the following: Name: fatrick Martin Address: Mesa Gardens Afurtments Apt. City: Pueblo State: CU Zip: 4100 Phone: 719-470-486 Email: Martin put010000 gmail. COM School: Voello County High School Age: 5								
What position are you applying for? Volunteer at Buckman Library								
Are you volunteering for school credit? No. If so, hours needed.								
Check the location(s) where you would like to volunteer: RawlingsBarkmanLambWhiteSatellite Please check the days and times you are available to volunteer:								
	Mon.	Tues.	Wed.	Thurs.	Fri,	Sat.	Sup.	
9am-1pm								
1pm-5pm								
5pm-9pm								
List one adult not related to you, whom we can contact for a reference. Name								
IN CASE OF EMERGENCY PLEASE CONTACT: PURCH MULTIN SI								
PHONE: 719-470-4186 RELATIONSHIP: Father								
of you are under 16, please have a parent sign below:								
permission to volunteer for the Pueblo City-County Library District.								
permission to volunteer for the Pueblo City-County Library District.								
/	Talk.	dur	1		10-20-2017			
Signature of parent or guardian				Date				

Please answer the following questions:

1. Why do you want to volunteer at the library and what do you hope to gain from this experience?

I would like to do it for for and gain librarian experience.

2. Please list your hobbies, interests, clubs or other information you would like us to know about you:

I like to read, sing, and play with friends. I'm in Drama, Speech and Debute, and Choir

3. How do you use the library? (homework, information, recreational reading, etc.)?

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 customers.

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: POWOW WITH DATE: 102017