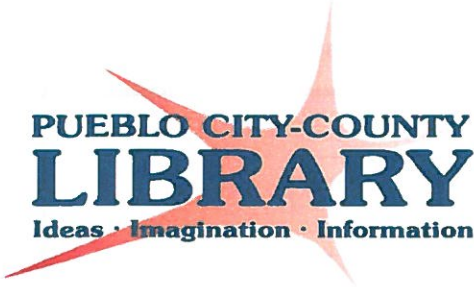


2130  
D. Martinez



# 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: REGGIE M. MARTINEZ DATE: 9-21-17

ADDRESS: 29 CALLE DEL SOL CITY: PUEBLO STATE: CO ZIP: 81008

HOW LONG AT ADDRESS 3 MONTHS

LIST PREVIOUS ADDRESS(ES) IF NOT LONGER THAN 7 YEARS

1606 W. TEXON AVE PUEBLO WEST CO 81007

HOME PHONE: 719-251-9047 WORK PHONE: — EMAIL: regbarb74@gmail.com

### EDUCATION:

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

SPECIAL QUALIFICATIONS OR SKILLS: TEACHER

### WORK EXPERIENCE:

Last or present position:

Employer DIST # 7 Position TEACHER City & State PUEBLO CO

Previous position:

Employer \_\_\_\_\_ Position \_\_\_\_\_ City & State \_\_\_\_\_

### REFERENCES:

Name RON MARTINEZ Phone 250-9993 Relationship SON

Name SAM COZZILINO Phone 545-3008 Relationship FRIEND

Name CHARLIE GONZALES Phone 214-2676 Relationship FRIEND

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE: NO

If yes please explain \_\_\_\_\_

IN CASE OF EMERGENCY PLEASE CONTACT: BARBARA MARTINEZ  
PHONE: 251-9048 RELATIONSHIP: WIFE

**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							
5pm-9pm							

How many hours are you interested in volunteering? 2 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? LITERACY

**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:  DATE: 9-21-17

**LIBRARY OFFICE USE ONLY**

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

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

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