

PUEBLO CITY-COUNTY LIBRARY

Ideas • Imagination • Information

TEEN TEAM APPLICATION

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

Please fill out the following:

Name: Trinity J. Sordal Date: 06-23-2017
 Address: 423 N. Glendale Ave
 City: Pueblo State: Co Zip: 81001
 Phone: 719-744-8764 Email: _____
 School: PAA Pueblo Academy of Arts Age: 12

Are you volunteering for school credit? ~~No~~ If so, hours needed 70
municipal courts

Check the location(s) where you would like to volunteer:
 Rawlings Barkman Lamb Pueblo West Giodone
 Patrick Lucero Greenhorn Valley

*29
by July 2017*

Please check the days and times you are available to volunteer:

	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.
9am-1pm							
1pm-5pm	X	X	X	X	X	X	X
5pm-9pm	X	X	X	X	X	X	X

List one adult not related to you, whom we can contact for a reference.

Name Wegh Curbie Phone 719-582-7540

Emergency Information:

IN CASE OF EMERGENCY PLEASE CONTACT: Melissa Sordal
 PHONE: 719-744-8764 RELATIONSHIP: mother

Parent signature required below:

I Melissa Sordal give my teen Trinity J. Sordal
 permission to volunteer for the Pueblo City-County Library District.

Signature of parent or guardian _____ Date 06-23-2017

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?

it will be a Great Opportunity to Gain Some Skills and Knowledge as well

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

Art, Drawing, Music
Harry Potter Reading.
Animals

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

for Home work Recreational
fun activities.
Computers

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.

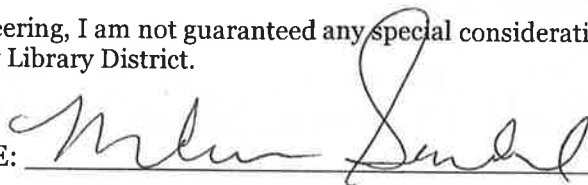
I understand that the Pueblo City-County Library District reserves the right to screen volunteers and will not accept as a volunteer anyone who would jeopardize any aspect of library service or safety of library staff and customers.

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:



DATE:

6-29-2012