

VOLUNTEER APPLICATION

Please drop your application in the Friends honor box at the location where you wish to volunteer, email to <u>friends@ppld.org</u>, or mail to Friends of PPLD, 5550 N. Union Blvd., Colorado Springs, CO 80918

Name		Other names used						
Address		City						
State Zip _		Emai	l address					
Home Phone		Cell Pho	one		Date of Birth	/	/	
Are you a meml	per of Frie	ends of the l	P PLD? Ye	S	NO			
For how long do								
Less than or month	1e	While I employi	•		Less than six months		More than six months	
Library Location	n Preferer	1CE (check all t	hat apply)					
Calhan		High Prain	rie		Old Colorado City		Ruth Holley	
		Library 21			Palmer Lake		Sand Creek	
 East Library Fountain 		 Manitou S Monumer 			Penrose		Ute Pass	
Availability (chec Mon Tue Work Experience Ast or present pos	Wed	□ Thu □ rolunteer and mi	ilitary service))	nes Available			
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I certify that the answers contained in this application are true and complete to the best of my knowledge. My volunteer service is conditional upon completion of the application and verification of the references and criminal background check. I am offering my services as a volunteer. If my offer is accepted, I will not be entitled to compensation for any services I provide.