



# Application for Employment

Date \_\_\_\_\_ E-Mail \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Are you over 18 years of age? yes or no

Which position are you applying for? \_\_\_\_\_

Would you be interested in other positions at the Co-op? \_\_\_\_\_

How did you hear about the job opening? \_\_\_\_\_

Date available to start work \_\_\_\_\_ Availability: Hours/Days/Shifts

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Are there any hours you cannot work? \_\_\_\_\_

Are there any conditions that might prevent you from doing the essential functions of the job or types of jobs for which you are applying? \_\_\_\_\_

Do you have any skills or experience in the following areas?

Co-ops \_\_\_\_\_

Cashiering \_\_\_\_\_

Retail Merchandising \_\_\_\_\_

Produce \_\_\_\_\_

Natural Foods \_\_\_\_\_

Customer Service \_\_\_\_\_

Computers \_\_\_\_\_

Kitchen \_\_\_\_\_

Are there other experiences or skills, which you feel would especially qualify you to work for the Co-op? \_\_\_\_\_

(Continued on other side)

Education

	School Name	Yrs Completed	Certificate/Diploma/Degree
High School			
Post Secondary			
Other Training			

Prior Work History

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Dates \_\_\_\_\_ Employer \_\_\_\_\_ Address \_\_\_\_\_  
\_\_\_/\_\_\_/\_\_\_ Contact Person \_\_\_\_\_ Phone \_\_\_\_\_  
\_\_\_/\_\_\_/\_\_\_ Responsibilities \_\_\_\_\_

Reason for leaving \_\_\_\_\_  
\_\_\_\_\_

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Dates \_\_\_\_\_ Employer \_\_\_\_\_ Address \_\_\_\_\_  
\_\_\_/\_\_\_/\_\_\_ Contact Person \_\_\_\_\_ Phone \_\_\_\_\_  
\_\_\_/\_\_\_/\_\_\_ Responsibilities \_\_\_\_\_

Reason for leaving \_\_\_\_\_  
\_\_\_\_\_

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Dates \_\_\_\_\_ Employer \_\_\_\_\_ Address \_\_\_\_\_  
\_\_\_/\_\_\_/\_\_\_ Contact Person \_\_\_\_\_ Phone \_\_\_\_\_  
\_\_\_/\_\_\_/\_\_\_ Responsibilities \_\_\_\_\_

Reason for leaving \_\_\_\_\_  
\_\_\_\_\_

What are your goals for the future, career or personal? How would working at the Co-op fit into your plans? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PROFESSIONAL REFERENCES** (no family or friends):

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

I certify that all of the information I have given here is true and complete, and I authorize investigation of all statements in this application.

\_\_\_\_\_  
Signature

Please feel free to attach resume or any additional information.