

# Employment Application

Work at the Co-op



## About You

Your Name:

Address:

City/State/ZIP:

Phone #:

Email:

If Hired, Can you prove you're eligible to work in the United States? Yes  No

Have you ever been convicted of a Felony?

Yes  No  Explain, if Yes \_\_\_\_\_

Tell us about your Education:

High School Grad/GED  College Grad

Post Grad  Vocational School

Info about your education/experience:

## Availability

When Can You Start?

Full Time (30+ hrs)  Part Time(10-29hrs)

Availability:

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
AM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other Obligations or Extra-curriculars:

## Questions

There are a lot of places to work in the Hills, why do you want to work here?

We are constantly trying to improve the Co-op, how will your personal strengths, skills, and leadership experience help us improve?

Do you have any specific experience or knowledge related to Natural Foods, Co-ops, or retail stores?

## References

\_\_\_\_\_  
Name Relationship Phone Number

\_\_\_\_\_  
Name Relationship Phone Number

\_\_\_\_\_  
Name Relationship Phone Number

## Prior Work History

Please list your previous three jobs, in order, beginning with the most recent:

Employer: \_\_\_\_\_ Employment dates: \_\_\_\_\_  
Address: \_\_\_\_\_ from \_\_\_\_\_  
Contact Person: \_\_\_\_\_ to \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Responsibilities: \_\_\_\_\_ Pay Rate: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

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Employer: \_\_\_\_\_ Employment dates: \_\_\_\_\_  
Address: \_\_\_\_\_ from \_\_\_\_\_  
Contact Person: \_\_\_\_\_ to \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Responsibilities: \_\_\_\_\_ Pay Rate: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

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Address: \_\_\_\_\_ from \_\_\_\_\_  
Contact Person: \_\_\_\_\_ to \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Responsibilities: \_\_\_\_\_ Pay Rate: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

I certify that all information in this application and any attached documents are true, correct, and complete to the best of my knowledge. I understand that any omitted or inaccurate information in this application may result in rejection of the application or, if hired, immediate termination of employment. I authorize all former employers to release job-related information about me and I release all persons or companies from any liability or responsibility for providing such information.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Applicant