



117 3rd Street, Downtown Bemidji 56601  
218-751-2009

# Application for Employment

Updated July 2010

Date: \_\_\_\_\_ Position applying for: \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

(\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ \_\_\_\_\_  
Home Phone Other Phone Email

Present Address \_\_\_\_\_ Apt. # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Have you ever been employed by the Co-op before?  Yes  No  
If yes, when? \_\_\_\_\_

Have you ever applied at the Co-op before?  Yes  No  
If yes, when? \_\_\_\_\_

Do you have any friends or relatives working at the Co-op?  Yes  No

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

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

## EMPLOYMENT DESIRED

Full-time work (30-40 hours per week)  Part-time work (32 and less hours per week)

Please indicate when you are available to work:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Are you available for work on weekends?  Yes  No

Are you able to work on-call for delivery days?  Yes  No

If hired, when could you start? \_\_\_\_\_

What planned vacations or extended time off do you need in the next 3 to 6 months? \_\_\_\_\_

Are you at least 18 years old? (If under 18, hire is subject to verification that you are of minimum legal age.)  Yes  No

Are you legally authorized to work in the U.S.? (Proof of eligibility will be required upon employment.)  Yes  No

Have you ever been convicted of a criminal offense (felony or serious misdemeanor)?  Yes  No

If yes, state the nature of the crime(s), when and where convicted and disposition of the case. \_\_\_\_\_

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

## **EMPLOYMENT HISTORY**

List your last four employers, starting with the most recent. Please complete this section even if you attach a resume.

\_\_\_\_\_  
Name of Business Supervisor Name (\_\_\_\_\_) Phone Number

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

Dates of Employment: \_\_\_\_\_ Hourly Pay: \_\_\_\_\_ Hours worked per week \_\_\_\_\_  
From To Starting Ending

Job Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ May we contact this employer for a reference?  Yes  No

\_\_\_\_\_  
Name of Business Supervisor Name (\_\_\_\_\_) Phone Number

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

Dates of Employment: \_\_\_\_\_ Hourly Pay: \_\_\_\_\_ Hours worked per week \_\_\_\_\_  
From To Starting Ending

Job Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ May we contact this employer for a reference?  Yes  No

\_\_\_\_\_  
Name of Business Supervisor Name (\_\_\_\_\_) Phone Number

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

Dates of Employment: \_\_\_\_\_ Hourly Pay: \_\_\_\_\_ Hours worked per week \_\_\_\_\_  
From To Starting Ending

Job Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ May we contact this employer for a reference?  Yes  No

\_\_\_\_\_  
Name of Business Supervisor Name (\_\_\_\_\_) Phone Number

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

Dates of Employment: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_ Hourly Pay: \_\_\_\_\_ Starting \_\_\_\_\_ Ending \_\_\_\_\_ Hours worked per week \_\_\_\_\_

Job Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ May we contact this employer for a reference?  Yes  No

**Please explain all periods of unemployment (if applicable):**

**Additional References (Optional):**

\_\_\_\_\_  
Name ( ) Phone Number

\_\_\_\_\_  
Name ( ) Phone Number

**SKILLS & INTERESTS**

**Have you ever shopped at the Co-op before? If yes, describe your experience and any of your favorite products.**

**What do you like about natural and organic foods?**

**Why would you enjoy working at the Co-op?**

**List skills relevant for position(s) applied for:**

**Describe a specific situation where you provided excellent customer service in your most recent job. Why was this effective?**

**What do you think your past supervisors would say are your strengths?**

**What do you think your past supervisors would say are your areas for improvement?**

**One of the requirements of this job is the ability to frequently move product weighing up to 50 pounds. Are you able to do that with or without reasonable accommodation?**

**Is there anything else you would like to add or is there anything else we should know in considering you for a job at the Co-op?**

*Thank you for your interest in joining our team. We will keep your application active for 30 days and on file for a period of 3 months.*