

# Honest Weight Food Co-op, Inc. Employment Application

(Please Print Clearly)

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## Personal Data

Name \_\_\_\_\_ Date \_\_\_\_\_

Permanent Address: Street \_\_\_\_\_

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

Phone Number \_\_\_\_\_

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## Job Interest

Position Applied For \_\_\_\_\_

Indicate Availability To Work:  Full Time  Part Time  Days  Evenings

Available To Start \_\_\_\_\_ Who referred you ? \_\_\_\_\_

Have you ever been employed by us before:  Yes  No

Are you legally permitted to work in this country:  Yes  No

Have you ever been convicted of a felony:  Yes  No

(Answer "no" if you received youthful offender adjudication or a felony conviction was vacated or you received a pardon. A "yes" answer will not automatically disqualify you, but does require the co-op to determine if, in its view, there is a relationship between the conviction and the employment sought or if granting employment would involve an unreasonable risk to property or the safety and welfare of others.)

Please indicate availability to work:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM

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## Education

Type	Name and Location	Courses Taken	Graduated		
			Yes	No	Enrolled
High School					
College					
University					
Business, Trade, Technical					
Other					

What special talents, hobbies or fields of interest will you bring to your job here at the Co-op?

**Employment History**  
(List previous employers beginning with most recent)

Company Name \_\_\_\_\_ Business Type \_\_\_\_\_  
 Address \_\_\_\_\_ Phone Number \_\_\_\_\_  
 Supervisor \_\_\_\_\_ Supervisor Title \_\_\_\_\_  
 Position \_\_\_\_\_  Full Time  Part Time  Temporary  
 Employment Dates (mm/yy): From \_\_\_/\_\_\_ To \_\_\_/\_\_\_ Ending Salary: \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_ May we contact:  Yes  No

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 Address \_\_\_\_\_ Phone Number \_\_\_\_\_  
 Supervisor \_\_\_\_\_ Supervisor Title \_\_\_\_\_  
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**References**

(Please list three professional references below)

Name	Company and Title	Business Telephone	Home Telephone

**I declare that the facts set forth in my application are true and complete. I understand that if I am employed, false information stated in this application shall be sufficient cause for dismissal. I understand that employment with the co-op is for no definite period of time. The co-op and its employees have at all times the right to terminate the employment relationship.**

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*It is the Policy of Honest Weight Food Co-op to provide equal employment opportunities to all applicants and employees without regard to race, color, religion, gender, sexual orientation, national origin, age, disability, veteran standing, or any legally protected status.*