Community Food Co-op Job Application		
First and Last Name:		
Email Address:	Primary Contact #:	
Available Start Date:	Preferred Location:	
Position Applying For:	Are you 18 or older?	
List any times and days of the week you are not available.	ilable:	
How many hours per week do you want to work?		
Desired Salary:		
Please briefly describe what excites you about work	ring at the Co-op:	
Please list any experience you feel would be an asse volunteer experience, professional training, etc.:	et to the Co-op, this may include education,	
List any skills you have that would be relevant to the position you are applying for:		
How long could you foresee yourself working at the	Co-op?	
What do you bring to a work environment that cont experience?	ributes to an excellent customer service	
Please list all of the languages you are fluent in:		

Company Name:City/State:Position:Start/End Dates:Reason for Leaving:Responsibilities:		
Reason for Leaving:		
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Reason for Leaving:		
Responsibilities:		
Company Name: City/State:		
Position: Start/End Dates:		
Reason for Leaving:		
Responsibilities:		
Reference		
Name:		
Email or Phone:		
Personal or Work Reference?		
Acknowledgement		
By submitting your application and signing below, you hereby certify that the facts set forth in the above employment application are true and complete to the best of your knowledge.		
Applicant Signature:		
Date Signed:		