

HILLSIDE

610 East 4th Street | Duluth, MN 55805
218.728.0884



DENFELD

4426 Grand Avenue | Duluth, MN 55807
218.728.0884

APPLICATION FOR EMPLOYMENT

Whole Foods Co-op (WFC) is a healthy, supportive workplace that offers competitive wages, employee discounts, training and development opportunities, and great benefits.

We are looking to hire people who:

- ▶ Are outgoing, friendly, always smiling and can offer outstanding customer service.
- ▶ Are open to working early mornings and/or evenings and at least one weekend shift per week.
- ▶ Enjoy working in a fast paced retail environment.
- ▶ Have a passion for great food and a preference for food that is locally produced using sustainable farming and production practices.

If you possess these qualities, please follow the application steps below:

- ☐ Complete all four pages of the WFC application. Type or print legibly in black or blue ink, answering all questions. Incomplete or unreadable applications will not be considered or processed.
- ☐ You may attach additional sheets or a resume detailing your work experience, but all questions on the WFC application must be completed and a resume will not replace completing the work history section.
- ☐ Submit your application. Applications may be turned in at the Customer Service Desk, mailed (see address above), faxed: **218.728.0490** or sent via e-mail to: **jobs@wholefoods.coop**.
- ☐ Your application will be considered active for 60 days after the date received. If you have not been contacted for an interview after 60 days and you are still interested in employment at WFC, please complete and submit a new application.

Whole Foods Co-op is an Equal Opportunity Employer.

This cover sheet is yours to keep.

Equal Employment Opportunities
Date of Application _____

It is the policy of Whole Foods Co-op ("WFC") to provide equal employment opportunities without regard to race, color, creed, national origin, religion, sex, gender, age, sexual orientation, marital status, status with regard to public assistance, membership or activity in a local commission, genetic information, union affiliation, or disability, to all qualified applicants and employees in all aspects of the employment relationship, including but not limited to recruitment, employment, job assignment, training, promotion, transfers, termination, rate of pay and other forms of compensation and benefits. **Please omit any references in this application to any organizations or activities that would reveal information about any of these protected classifications.**

► Contact Information

Last Name _____	First Name _____
Current Street Address _____	
City _____	State _____ Zip _____
Primary Phone _____	E-mail _____
Have you ever worked at WFC before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when? _____	
Have you ever applied at WFC before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when? _____	
What position are you applying for? _____	
Please list other positions you would be interested in _____	

► Availability

What date are you available to begin work? _____						
Would you prefer part-time employment? _____						
What is the maximum number of hours you could work per week? _____ Minimum? _____						
Where did you hear about the job openings at WFC? _____						
Please list your work availability below (<i>shifts begin as early as 5:30 AM and end as late as 10:00 PM</i>):						
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
_____	_____	_____	_____	_____	_____	_____

► Education

SCHOOL	LOCATION (City, State)	DEGREE RECEIVED or YEARS COMPLETED	GRADUATED?
High School or GED	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
College, Vocational (or other training certificate)	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

► Employment History — *Please list in order, your last 3 (three) jobs, starting with the most recent:*

Employer _____ Phone _____

Job Title _____ Supervisor's Name _____

Street Address _____ City _____ State _____

Starting Wage or Salary _____ Final Wage or Salary _____

Dates of Employment (Month/Year) _____ to _____

Reason for Leaving _____ May we contact this employer? ☐ Yes ☐ No

Describe your job duties and responsibilities _____

Employer _____ Phone _____

Job Title _____ Supervisor's Name _____

Street Address _____ City _____ State _____

Starting Wage or Salary _____ Final Wage or Salary _____

Dates of Employment (Month/Year) _____ to _____

Reason for Leaving _____ May we contact this employer? ☐ Yes ☐ No

Describe your job duties and responsibilities _____

Employer _____ Phone _____

Job Title _____ Supervisor's Name _____

Street Address _____ City _____ State _____

Starting Wage or Salary _____ Final Wage or Salary _____

Dates of Employment (Month/Year) _____ to _____

Reason for Leaving _____ May we contact this employer? ☐ Yes ☐ No

Describe your job duties and responsibilities _____

► **Experience — Relevant Job Skills** *please check the skills you possess:*

- | | | |
|---|--|--|
| <input type="checkbox"/> Customer Service | <input type="checkbox"/> Barista | <input type="checkbox"/> Co-ops/Natural Food Stores |
| <input type="checkbox"/> Cashiering | <input type="checkbox"/> Deli Counter | <input type="checkbox"/> Supervisory Experience |
| <input type="checkbox"/> Cooking | <input type="checkbox"/> Baking | <input type="checkbox"/> Merchandising/Purchasing |
| <input type="checkbox"/> Grocery Stocking | <input type="checkbox"/> Grocery Receiving | <input type="checkbox"/> Computer Proficiency (describe below) |
| <input type="checkbox"/> Produce Stocking | <input type="checkbox"/> Produce Receiving | <input type="checkbox"/> Bookkeeping/Accounting |

► **Describe any additional work history, skills and/or experience relevant to the job you are applying for:**

► **Why do you want to work for Whole Foods Co-op?**

► **Please give at least two ways you could provide excellent customer service to our owners and customers:**

► **What is your favorite food and why?**

PLEASE TURN TO THE REVERSE SIDE OF THIS PAGE TO READ AND COMPLETE THE ACKNOWLEDGEMENT AND SIGNATURE SECTION. YOUR APPLICATION CANNOT BE CONSIDERED WITHOUT IT COMPLETED.

► Acknowledgements and signature

Are you able to perform the job you are applying for with or without reasonable accommodation? ☐ Yes ☐ No

Are you legally authorized to work in the United States? ☐ Yes ☐ No

Please read the following statements. If they are accurate, please sign this job application form.
Applications that are not signed will not be considered as properly completed.

I certify that all of the information given on this job application is true, complete, and correct to the best of my knowledge. By signing this application, I am acknowledging that any false or misleading information supplied by me shall be grounds for not hiring me. I am also acknowledging that any false or misleading information supplied by me shall be grounds for automatic termination of employment, should this fact be discovered after I have been hired.

I authorize WFC to investigate all statements and information included on this application, including but not limited to my employment record. I release WFC and all educational institutions, employers and personal references I have listed herein, and their employees, officers and agents, from any and all liability for all claims or damages of any kind in connection with the release of information about me to WFC pursuant to this authorization, and do hereby further agree to defend, indemnify and hold harmless WFC, educational institutions, employers and personal references from and against any and all such actions, causes of actions, suits, losses, liabilities, damages and expenses (including attorneys' fees).

I understand that if I am hired I must comply with all WFC policies and procedures. I understand that this application does not create an offer or contract of employment. I understand that, if hired, my employment with WFC will be on an "at-will" basis, which means that either WFC or I may terminate the employment relationship at any time, for any lawful reason, with or without cause or notice.

Signature _____ Date _____