



CITY CENTER MARKET

food co-op & deli

APPLICATION FOR EMPLOYMENT

122 N BUCHANAN ST. | CAMBRIDGE, MN | 763.689.4640 | CITYCENTERMARKET.COOP

APPLICANT INFORMATION

**=Required Field*

Name*: _____

Email*: _____

Date: _____

Home Phone: _____ Mobile Phone*: _____

Address*: _____

City: _____ State/Province: _____ Zip/Postal: _____

AVAILABILITY

City Center Market is open to the public:

- Monday–Friday: 7:00 am to 8:00 pm
- Saturday: 8:00 am to 8:00 pm
- Sunday: 8:00 am to 6:00 pm

What would your availability and preferred hours worked be?

Employment Desired*:

- Full-time (36 to 40 hours)
 Part-time (Up to 24 hours)
 Full- or Part-time

Weekly Availability:

Day	AM	PM
Monday	<input type="checkbox"/>	<input type="checkbox"/>
Tuesday	<input type="checkbox"/>	<input type="checkbox"/>
Wednesday	<input type="checkbox"/>	<input type="checkbox"/>
Thursday	<input type="checkbox"/>	<input type="checkbox"/>
Friday	<input type="checkbox"/>	<input type="checkbox"/>
Saturday	<input type="checkbox"/>	<input type="checkbox"/>
Sunday	<input type="checkbox"/>	<input type="checkbox"/>

Open Availability

Date Available to Start: _____

Other Commitments that may affect your employment? (school, other job, etc.):

Tell us what makes you a great employee!

Position Applying For: _____

Would you be interested in another position if available?

Storekeeper Cashier Deli Associate Barista Not Interested in Another Position

Are you at least 16 years old? Yes No

Are you authorized to work in the U.S.? Yes No

Have you previously worked for the co-op? Yes No

JOB AND/OR VOLUNTEER EXPERIENCE

Employer #1

- Supervisor's Name: _____
- Dates Employed: _____

- Phone Number: _____
- May we contact your previous supervisor for a reference? [] Yes [] No
- Address: _____
 - City: _____ State/Province: _____ Zip: _____

Employer #2

- Supervisor's Name: _____
- Dates Employed: _____
- Phone Number: _____
- May we contact your previous supervisor for a reference? [] Yes [] No
- Address: _____
 - City: _____ State/Province: _____ Zip: _____

Employer #3

- Supervisor's Name: _____
- Dates Employed: _____
- Phone Number: _____
- May we contact your previous supervisor for a reference? [] Yes [] No
- Address: _____
 - City: _____ State/Province: _____ Zip: _____

EDUCATIONAL BACKGROUND (IF APPLICABLE)

Highest Level of Education: _____

School #1

- Years Attended: _____ Did You Graduate? [] Yes [] No
- Address: _____
 - City: _____ State/Province: _____ Zip: _____

School #2

- Years Attended: _____ Did You Graduate? [] Yes [] No
- Address: _____
 - City: _____ State/Province: _____ Zip: _____

School #3

- Years Attended: _____ Did You Graduate? [] Yes [] No
- Address: _____
 - City: _____ State/Province: _____ Zip: _____

REFERENCES

Do you have any super fans that want to tell us how amazing you are? We'd love to chat with them!

Reference #1

- Name: _____ Relationship: _____
- Phone: _____

Reference #2

- Name: _____ Relationship: _____
- Phone: _____

Reference #3

- Name: _____ Relationship: _____
- Phone: _____

PLEASE READ BEFORE SUBMITTING YOUR APPLICATION

Accuracy of Information: I certify that all the information submitted by me on this application is true and complete to the best of my knowledge, and I understand that if I am employed, false statements or misleading information on this application can be grounds for termination of my employment. I understand that this application, if I am employed by City Center Market, will become part of my personnel file.

Authorization for Release of Information: In connection with his application, I authorize my former employers, schools, law enforcement agencies and branches of the military to release information they may have about me. I release all parties supplying such information and City Center Market from any liability arising out of the release of any information.

Co-op Rules and Regulations: In consideration of my employment, I agree to abide by City Center Market's policies and procedures currently in existence and those that are implemented during my employment.

Signature*: _____ **Date:** _____

Thank you for applying to City Center Market!