

SHELBY COUNTY CO-OP APPLICATION FOR EMPLOYMENT

Shelby County Co-op is an equal opportunity employer. Shelby County Co-op does not discriminate in employment with regard to race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service or any other characteristic protected by law.

PERSONAL INFORMATION

Please complete all fields.

Name _____ Date _____

Address _____

E-mail Address _____

Home Phone # _____ Mobile Phone # _____

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

Are you at least 18 years or older? (If no, you may be required to provide authorization to work.)

Yes No

Can you work any shift? Yes No If no, explain: _____

Can you work overtime, including weekends? Yes No

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? Yes No

EMPLOYMENT DESIRED

Date you can start _____ Hourly rate/Salary desired _____

Position desired _____

Are you currently employed? If so may we inquire of your present employer? _____

REFERRAL SOURCE

How did you hear about us? Walk In - Advertisement - Referral - Other: _____

Have you ever worked for this company before?

Yes No Explain _____

Do you know anyone who works for our company? Yes No If yes, who? _____

EDUCATION	Name and location of school	Degree Received	Subjects studied/Major
High School			
College or University			
Trade, Business or Correspondence School			

EMPLOYMENT HISTORY Include your last seven (7) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time. *Incomplete information could disqualify you from further consideration.*

From	To	Employer Name	Telephone
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving			
From	To	Employer	Telephone
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving			
From	To	Employer	Telephone
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving			

Do you have any special skills, experience and/or training that would enhance your ability to perform the position applied for? If yes, explain.

REFERENCES

Give the names of three persons not related to you, whom you have known at least three (3) years.

Name	Address, Phone, Email	Company	Years Acquainted
1			
2			
3			

Please read carefully before signing.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Shelby County Co-op to hire me. If I am hired, I understand that either Shelby County Co-op or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Shelby County Co-op has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to Shelby County Co-op true and complete information on this application. No requested information has been concealed. I authorize Shelby County Co-op to contact references provided for employment reference checks. I acknowledge that a pre-employment drug screen as well as a pre-employment background check is required to be considered for employment with Shelby County Co-op. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Date _____ Signature _____

THIS APPLICATION IS VALID ONLY FOR 90 DAYS FROM THE DATE ABOVE.