



# Employment Application

APPLICATION WILL BE ACCEPTED ON A ROLLING BASIS UNTIL POSITIONS ARE FILLED.

<p>Select the position(s) you are applying for:</p> <p><input type="checkbox"/> Store Manager</p> <p><input type="checkbox"/> Meat Market Supervisor/Meat Cutter</p> <p><input type="checkbox"/> Full Time Cashier/Deli Clerk</p> <p><input type="checkbox"/> Part Time Cashier/Deli Clerk</p>	<p>Please Submit Application to:</p> <p>Valley Foods Cooperative          PO Box 133          416 W. Hoffman St          Lynch, NE 68746          valleyfoodscooperative@gmail.com</p>
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Applicant Information			
First Name	Last Name	M. I.	Date
Street/Mailing Address			
City	State	Zip	
Phone	Email		

Availability							
When can you start?				How many hours per week could you work?			
Hours of Operation	Monday 9am-6pm	Tuesday 9am-6pm	Wednesday 9am-6pm	Thursday 9am-6pm	Friday 9am-6pm	Saturday 9am-6pm	Sunday 10am-12pm
List hours you are able and willing to work:							

Why do you want to work/volunteer at Valley Foods Cooperative?

**Work History - Please list the last 3 jobs you have held**

Employer 1	Dates Employed
Position	City/State
Supervisor	Supervisor Contact
Responsibilities	
Employer 2	Dates Employed
Position	City/State
Supervisor	Supervisor Contact
Responsibilities	
Employer 3	Dates Employed
Position	City/State
Supervisor	Supervisor Contact
Responsibilities	

Yes No

- Are you able to lift up to 50 pounds?  Yes  No
- Have you ever worked in a grocery store?  Yes  No
- Have you ever taken a ServSafe class?  Yes  No

Do you have experience working with any of the following? Check all that apply.

- |                                               |                                                                 |                                                |
|-----------------------------------------------|-----------------------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> Supervision          | <input type="checkbox"/> Operating Cash Register/Handling Money | <input type="checkbox"/> Retail Work           |
| <input type="checkbox"/> Training             | <input type="checkbox"/> Customer Service                       | <input type="checkbox"/> Addressing Complaints |
| <input type="checkbox"/> Inventory Management | <input type="checkbox"/> Cleaning/Sanitation                    | Or Concerns                                    |
| <input type="checkbox"/> Food Safety          | <input type="checkbox"/> Making Deli Sandwiches                 |                                                |

**References - Please provide 3 non-related references**

Name	Title	Relationship to Applicant	Contact Information