



COOK COUNTY  
CO-OP

20 E 1<sup>st</sup> St · PO Box 813  
Grand Marais, MN 55604  
218-387-2503  
cookcounty.coop/employment

# Employment Application

## Personal Information

Name			
Address	City	State	Zip
E-mail	Phone	Time most likely to be reached: <input type="checkbox"/> 9am-12pm <input type="checkbox"/> 12pm-3pm <input type="checkbox"/> 3pm-6pm	

If hired, can you show evidence of your right to work in the U.S.? //  Yes  No

## Employment Information

Position desired: \_\_\_\_\_

Check any area listed below in which you have skills or experience:

- |  |                                       |   |
|--|---------------------------------------|---|
| <input type="checkbox"/> Cash Register | <input type="checkbox"/> Food service | <input type="checkbox"/> Produce          |
| <input type="checkbox"/> Cooperatives  | <input type="checkbox"/> Nutrition    | <input type="checkbox"/> Customer Service |

For each item checked above, please state where and when you acquired these skills and experiences:

What date are you available to start work? \_\_\_\_\_

If there are any hours you cannot work, what are they? \_\_\_\_\_



COOK COUNTY  
CO-OP

20 E 1<sup>st</sup> St · PO Box 813  
Grand Marais, MN 55604  
218-387-2503  
cookcounty.coop/employment

Maximum number of hours a week you can work? \_\_\_\_\_

Minimum number of hours a week you can work? \_\_\_\_\_

What are your pay requirements? \_\_\_\_\_

Have you ever applied for work at the Co-op before? //  Yes  No

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

Are there any other experiences or skills you feel would especially qualify you to work for the Co-op?

## Education and Training

School Name	Location	Number of completed years	Did you graduate?
1.			
2.			
3.			
Other trainings or certifications:			



COOK COUNTY  
CO-OP

20 E 1<sup>st</sup> St · PO Box 813  
Grand Marais, MN 55604  
218-387-2503  
cookcounty.coop/employment

## Former Employers

Duration of Employment (Month, Year)	Business Name	Position	Reason for Leaving	Contact for a Reference
Start + End Dates				Name + Phone
Start + End Dates				Name + Phone
Start + End Dates				Name + Phone
Start + End Dates				Name + Phone

If you are currently employed, may we contact your present employer?

Yes     No     Not Applicable / Unemployed

## References

Provide the name of two references, not related to you, whom you have known for at least a year:

Name	Phone	Job Title	How acquainted and for how long?



COOK COUNTY  
CO-OP

20 E 1<sup>st</sup> St · PO Box 813  
Grand Marais, MN 55604  
218-387-2503  
[cookcounty.coop/employment](http://cookcounty.coop/employment)

---

## Profile Information

Are you a current owner (member) of the Co-op? //  Yes  No

How would working at the Co-op fit into your future, career, or personal plans?

How are you familiar with cooperative groceries and related products?

Why do you wish to work at Cook County Co-op?

What does it mean to provide GREAT customer service as part of your job?



COOK COUNTY  
CO-OP

20 E 1<sup>st</sup> St · PO Box 813  
Grand Marais, MN 55604  
218-387-2503  
[cookcounty.coop/employment](http://cookcounty.coop/employment)

How did you hear about this job opportunity?

- Our website, [cookcounty.coop](http://cookcounty.coop)       Our Email Newsletter  
 Ad on boreal.org       Store sign / walk-in  
 Referral \_\_\_\_\_  Other \_\_\_\_\_

## Authorization & Signature

I authorize my present and former employers (unless otherwise indicated on this application) to release to the co-op any information concerning my employment, including my job performance. Further, I release all these parties from liability for any damage, (except what resulting from misrepresentation,) which might result from furnishing this information.

The information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I understand that falsified information or significant omissions may disqualify me from further consideration and may be considered grounds for dismissal if discovered at a later date.

I understand that employment with the Co-op is for no definite period of time. Both the Co-op and its employees have, at all times, the right to terminate the employment relationship.

Applicant Signature	Date
---------------------	------



COOK COUNTY  
CO-OP

20 E 1<sup>st</sup> St · PO Box 813  
Grand Marais, MN 55604  
218-387-2503  
cookcounty.coop/employment

## Administrative Use (applicant - leave this blank)

### Comments & Remarks

### Hiring Information

Date of Offer	Position	1 <sup>st</sup> Day of Work	Wage / Salary

### Approval Signatures

Date	Department Manager	Date	General Manager

### HR

Date of Orientation	Personnel Administrator	Date of Payroll Info Entered in Database	Payroll Clerk