

**FLAGLER COOPERATIVE ASSOCIATION
COUNTRY STORE
EMPLOYMENT APPLICATION**

NAME: _____

CURRENT ADDRESS: _____

PHONE NUMBER: _____ AGE (IF UNDER 21): _____

EDUCATION: COMPLETE DATE & DEGREE (NAME & ADDRESS OF SCHOOL/SCHOOLS):

HEALTH CONDITION: GOOD: _____ FAIR: _____ EXCELLENT: _____

DO YOU HAVE ANY PHYSICAL IMPAIRMENTS, LIMITATIONS, OR MEDICAL CONDITIONS THAT WOULD IMPAIR YOU TO DO THE JOB FOR WHICH YOU ARE APPLYING FOR? YES _____ NO _____

IF YES, GIVE DETAILS: _____

HAVE YOU HAD ANY OF THE FOLLOWING TRAINING:

CONVENIENCE STORE: _____ COMPUTER: _____ BOOKKEEPING: _____ REGISTER: _____

FOOD SERVICE: _____ OTHER: _____

YOU ARE APPLYING FOR (PLEASE CHECK ONE):

SEASONAL/TEMPORARY WORK: _____

PART TIME/LONG TERM WORK: _____

FULL TIME/LONG TERM WORK: _____

IF APPLYING FOR TEMPORARY WORK, WHEN WILL YOU BE AVAILABLE? _____

POSITION DESIRED: _____ DESIRED HOURLY PAY: _____

DESIRED HOURS PER WEEK: _____ MORNING OR NIGHT SHIFTS: _____

CAN YOU WORK WEEKENDS: _____

WHAT DAYS & HOURS ARE YOU AVAILABLE FOR WORK? _____

IF HIRED, ON WHAT DATE CAN YOU START WORKING: /_____/

IF HIRED, WOULD YOU HAVE TRANSPORTATION TO/FROM WORK? [] Y or [] N

OTHER COMMENTS: _____

HAVE YOU WORKED FOR THE FLAGLER CO-OP PREVIOUSLY: _____

IF YES REASON FOR LEAVING: _____

HAVE YOU EVER BEEN CONVICTED OF A CRIME: _____

IF YES PLEASE EXPLAIN INCLUDING DATES: (A YES ANSWER WILL NOT AUTOMATICALLY DISQUALIFY YOU FROM EMPLOYMENT. WE WILL CONSIDER THE NATURE AND DATE OF THE OFFENSE FOR JOB-RELATED PURPOSES ONLY)

PREVIOUS WORK EXPERIENCE: (Please list most recent previous two jobs)

EMPLOYER: _____ POSITION HELD/DUTIES: _____
ADDRESS: _____
FROM: _____ TO: _____ REASON FOR LEAVING: _____
MANAGERS NAME & TITLE: _____
MAY WE CONTACT: _____ PHONE NUMBER: _____
STARTING SALARY: _____ FINAL SALARY: _____

EMPLOYER: _____ POSITION HELD/DUTIES: _____
ADDRESS: _____
FROM: _____ TO: _____ REASON FOR LEAVING: _____
MANAGERS NAME & TITLE: _____
MAY WE CONTACT: _____ PHONE NUMBER: _____
STARTING SALARY: _____ FINAL SALARY: _____

PLEASE LIST TWO REFERENCES IN WHICH WE MAY CONTACT: (Please do not list family)

NAME: _____ NAME: _____
ADDRESS: _____ ADDRESS: _____
RELATIONSHIP: _____ RELATIONSHIP: _____
PHONE NUMBER: _____ PHONE NUMBER: _____

PLEASE RATE YOURSELF ON THE FOLLOWING BY CIRLING 5 BEING HIGHEST 1 BEING LOWEST:

RELIABILITY: 1 2 3 4 5 HONESTY: 1 2 3 4 5 CUSTOMER SERVICE: 1 2 3 4 5
CLEANLINESS: 1 2 3 4 5 TEAMWORK: 1 2 3 4 5 MONEY HANDLING: 1 2 3 4 5

Please Answer the Following Questions:

Why are you applying to work here?

If hired, how long do you expect to work here?

Why do customers shop at this store?

What is customer service?

A customer complains that the coffee tastes terrible, what would you do?

What would you do if your replacement doesn't show up when it's time to go home?

A customer leaves without paying for gas, what would you do?

A co-worker is rude to customers, what would you do?

The customer's purchase totals \$13.93. They give you a ten dollar bill and a five dollar bill. How much change do you give them?

If one bottle of soda costs .99, how much does three cost?

I certify that the foregoing statements are true and correct. I authorize Flagler Cooperative Association to make investigation of my personal or employment history and authorize any present/former employer, person, firm, corporation, credit agency or government agency to give Flagler Cooperative Association any information they may have regarding me, and I understand that any misrepresentation, or omission shall be cause for dismissal. In consideration of the prospective employer review of this application, I release Flagler Cooperative Association and all providers of information from any liability as a result of furnishing and receiving this information.

I further agree that, if employed, I will conform my conduct to Flagler Cooperative Association's rules, regulations and personnel policies. I understand that no personnel recruiter, interviewer or other representative other than an officer of Flagler Cooperative Association has authority to enter into any agreement for employment for any specified period of time and that any employment manuals or handbooks that may be distributed to me during the course of my employment shall not be construed as a contract. I further understand that nothing contained in this application or the granting of an interview creates a contract for either employment or providing any benefit, and **THAT I HAVE THE RIGHT TO TERMINATE EMPLOYMENT AT ANY TIME AND THAT FLAGLER COOPERATIVE ASSOCIATION HAS THE SAME RIGHT.**

Date: _____ Signature: _____