

610 East 4th Street | Duluth, MN 55805 (218)728-0884

www.wholefoods.coop

Whole Foods Co-op (WFC) is a healthy, supportive workplace that offers competitive wages, employee discount, training and development opportunities, and great benefits.

We are looking to hire people who:

- Are outgoing, friendly, always smiling and can offer outstanding customer service
- Are open to working early mornings and/or evenings and at least one weekend shift per week
- Enjoy working in a fast paced retail environment
- Have a passion for great food and a preference for food that is locally produced using sustainable farming and production practices

If you possess these qualities, please follow the application steps below:

Complete all four pages of the WFC application. Type or print legibly in black or blue ink, answering all questions. Incomplete or unreadable applications will not be considered or processed.
You may attach additional sheets or a resume detailing your work experience, but all questions on the WFC application must be completed and a resume will not replace completing the work history section.
Submit your application. Applications may be turned in at the Customer Service Desk, mailed (see address above), faxed: (218) 728-0490 or sent via e-mail to: jobs@wholefoods.coop .
Your application will be considered active for 60 days after the date received. If you have not been contacted for an interview after 60 days and you are still interested in employment at WFC, please complete and submit a new application.

Due to the high volume of applications we receive,
PLEASE DO NOT CONTACT WFC REGARDING THE STATUS OF YOUR APPLICATION.

Whole Foods Co-op is an Equal Opportunity Employer.

This cover sheet is yours to keep.



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Date of Application:	
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It is the policy of Whole Foods Co-op ("WFC") to provide equal employment opportunities without regard to race, color, creed, national origin, religion, sex, age, sexual orientation, marital status, status with regard to public assistance, membership or activity in a local commission, genetic information, union affiliation, or disability, to all qualified applicants and employees in all aspects of the employment relationship, including but not limited to recruitment, employment, job assignment, training, promotion, transfers, termination, rate of pay and other forms of compensation and benefits.

Please omit any references in this application to any organizations or activities that would reveal information about any of these protected classifications.

CONTACT	INFORMATI	ON				
Last Name:_			F	irst Name:		
Current Stree	et Address:					
City:			S	tate:Zip	D:	
Primary Phor	ne:		E	-mail:		
Have you eve	er worked at W	FC before? Yes	s □ No □ If	yes, when?		
Have you eve	er applied at W	FC before? Yes	s □ No □ If	yes, when?		
What position	n are you apply	ing for?				
Please list otl	her positions y	ou would be in	terested in:			
AVAILABIL	ITY					
What date are	e you available	to begin work?				
Would you pr	refer part-time	employment?_				
What is the n	naximum num	ber of hours yo	u could work p	er week?	Minimum	?
Where did yo	u hear about tl	ne job opening	s at WFC?			
Please list yo	ur work availat	oility below (shi	fts begin as ea	rly as 5:30 AM an	d end as late as 10:	00 PM):
Monday	Tuesday	Wednesday	y Thursday	Friday	Saturday	Sunday
EDUCATIO) N					
School		ocation (City, St	rate)	Subjects Studied	d Years Complete	d Graduated?
High School		(3.3), 3		•		
College, Voca	ational					
(or Other Training	ng Certificate)					



EMPLOYMENT HISTORY			
Please list in order, your last 3 (three) jobs, star	ting with the most recent:		
1			
Employer:	Phone:		
Supervisor's Name and Title:			
Street Address:	City:	State:	
Starting Wage or Salary:	Final Wage or Salary	:	
Dates of Employment (Month/Year):	to		
Reason for Leaving:	May we contact this employer? Yes 🗌 No 🗆		
Describe your job duties and responsibilities:_			
2			
Employer:	Phone:		
Supervisor's Name and Title:			
Street Address:	City:	State:	
Starting Wage or Salary:	Final Wage or Salary:		
Dates of Employment (Month/Year):	to		
Reason for Leaving:	May we contact this employer? Yes \Box No		
Describe your job duties and responsibilities:_			
3			
Employer:	Phone:		
Supervisor's Name and Title:			
Street Address:	City:	State:	
Starting Wage or Salary:	Final Wage or Salary	:	
Dates of Employment (Month/Year):	to		
Reason for Leaving:	May we co	ontact this employer? Yes 🗌 No 🗌	
Describe your job duties and responsibilities:_			



EXPERIENCE		
Relevant Job Skills (Please check	the skills you possess):	
☐ Customer Service	☐ Barista	☐ Co-ops/Natural Food Stores
☐ Cashiering	☐ Waiting Tables	☐ Supervisory Experience
☐ Cooking	☐ Baking	☐ Deli Counter
☐ Grocery Stocking	☐ Grocery Receiving	Computer Proficiency (describe below)
☐ Produce Stocking	☐ Produce Receiving	☐ Bookkeeping/Accounting
Please describe any additional v	vork history, skills and/or experienc	ce relevant to the job you are applying for:
Why do you want to work for W	hole Foods Co-op?	
Please give at least two ways yo	u could provide excellent customer	r service to our owners and customers:
What is your favorite food and v	vhy?	

PLEASE TURN TO THE REVERSE SIDE OF THIS PAGE TO READ AND COMPLETE THE ACKNOWLEDGEMENT AND SIGNATURE SECTION. YOUR APPLICATION CANNOT BE CONSIDERED WITHOUT IT COMPLETED.



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ACKNOWLEDGEMENTS AND SIGNAT	URE
Are you able to perform the job you are applyi	ng for with or without reasonable accommodation? Yes \Box No \Box
Are you legally authorized to work in the Unite	ed States? Yes 🗆 No 🗀
Please read the following statements. If they a which are not signed will not be considered as	re accurate, please sign this job application form. Applications properly completed.
knowledge. By signing this application, I am a by me shall be grounds for not hiring me. I an	is job application is true, complete, and correct to the best of my cknowledging that any false or misleading information supplied a also acknowledging that any false or misleading information c termination of employment, should this fact be discovered
not limited to my employment record. I release references I have listed herein, and their emploclaims or damages of any kind in connection this authorization, and do hereby further agree	and information included on this application, including but e WFC and all educational institutions, employers and personal oyees, officers and agents, from any and all liability for all with the release of information about me to WFC pursuant to e to defend, indemnify and hold harmless WFC, educational es from and against any and all such actions, causes of actions, s (including attorneys' fees).
application does not create an offer or contract	with all WFC policies and procedures. I understand that this ct of employment. I understand that, if hired, my employment means that either WFC or I may terminate the employment, with or without cause or notice.
Signature:	Date