



The Monte Vista Cooperative
1901 E. HWY 160
Monte Vista, CO 81144
719-852-5181

Application for Employment
“An Equal Opportunity Employer”

Instructions: **Please print, write or type all information clearly.** The application must be filled out accurately and completely. Answer all questions. Do not leave an item blank. If an item does not apply, write N/A (not applicable). You may attach copies of documents or certificates, which support your application. **All statements made on this application are subject to verification. Exaggerated, false, or misleading statements may be cause for rejection of the application and/or termination of employment.**

Name: _____
Last Name First Name MI

Today's Date: _____ Email Address: _____

Home Phone: _____ Cell Phone: _____

Address: _____

Mailing Address: _____

Position:

Position applying for: _____

Desired Pay: _____

Circle One: Full-Time Part-Time Seasonal/Temporary

EMPLOYMENT HISTORY: The information you provide, in addition to education, will be used to determine if you meet the minimum qualifications, and in some cases, placement of the eligibility list for the position you are seeking. Indicate date, month and year beginning and ending for each position held and a description of duties performed for each. Start with your current or most recent employer.

Employer: _____

Address: _____

Phone Number: _____ Position Title: _____

Dates: From _____ To _____

Supervisor: _____

Reason for changing employment: _____

Description of job duties: _____

May we contact your supervisor: _____

Employer: _____

Address: _____

Phone Number: _____ Position Title: _____

Dates: From _____ To _____

Supervisor: _____

Reason for changing employment: _____

Description of job duties: _____

May we contact your supervisor: _____

Employer: _____

Address: _____

Phone Number: _____ Position Title: _____

Dates: From _____ To _____

Supervisor: _____

Reason for changing employment: _____

Description of job duties: _____

May we contact your supervisor: _____

Employer: _____

Address: _____

Phone Number: _____ Position Title: _____

Dates: From _____ To _____

Supervisor: _____

Reason for changing employment: _____

Description of job duties: _____

May we contact your supervisor: _____

***Additional Employment information:** List any accomplishments, hobbies, skills, scholastic honors, interests, or experiences that you would like noted. Attach additional sheets if necessary.

Education:

School Name	Location	Years attended	Degree received	Major

You are studying now? _____ If so where? _____ Courses: _____

Have you ever worked for the Monte Vista Cooperative?

Yes _____ No _____

When are you available to begin work, if selected for employment? _____

Have you been convicted of any violation of the law other than a minor traffic offense?

Yes _____ No _____

Signature Disclaimer:

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my employment being terminated.

Applicant's Signature

Date

**The Monte Vista Cooperative
Authorization for Reference Inquiry**

Name: _____

Date: _____

References to be contacted:

References: List Three (3) personal references who are not relatives or former employers.

Name: _____

Address: _____

Phone Number: _____ Occupation: _____

Name: _____

Address: _____

Phone Number: _____ Occupation: _____

Name: _____

Address: _____

Phone Number: _____ Occupation: _____

I, _____ give my consent and authorize The Monte Vista Cooperative Human Resource Department to conduct a reference check on the above-named references. Reference information may include achievement, performance, attendance, disciplinary information or reason for separation of employment. It is understood that any information given is to be used solely for the purpose of determining my acceptability for employment. I release former employers, their agents/employees, from any liability for damages or claims which may result from information provided.

Applicant's Signature: _____

Signature of person conducting reference inquiry:

Date: _____