



RETAIL JOB APPLICATION

Date_____

Surname _____ First _____ Initial _____

Address _____ City _____ Province _____ Postal code _____

Home phone () _____ E-mail _____

Which position are you applying for?

Retail store ☐ Cashier ☐ Product Floor ☐ Member Service Desk ☐ Backstock / Warehouse

(Location) ☐ Victoria ☐ Vancouver ☐ North Vancouver ☐ Calgary ☐ Edmonton ☐ Winnipeg ☐ Toronto ☐ Burlington
 ☐ Ottawa ☐ Montréal ☐ Québec ☐ Halifax

Service Centre (Vancouver, BC) ☐ Service Representative

How did you learn of this position? _____

Have you worked for MEC before? ☐ Yes ☐ No

If yes, when? _____ Position & Location _____

Why do you want to work at Mountain Equipment Co-op? _____

Are you legally entitled to work in Canada? ☐ Yes ☐ No

If hired, what date would you be available for work? _____

List the days & hours you are available:

☐ Full-Time (minimum 30 hours per week) ☐ Part-Time (minimum 15 hours per week) ☐ Casual (on-call basis)

Hours available for work _____

Days available for work _____

Are there any hours of work restrictions we should be made aware of? _____

What languages are you fluent in? _____

First aid training? ☐ Yes ☐ No

If yes, please list type of training and certification date _____

What computer programs do you have experience in? _____

EDUCATIONAL BACKGROUND

TYPE OF SCHOOOL	NAME	COURSE MAJOR	GRADUATED
Secondary	_____	_____	<input type="radio"/> Yes <input type="radio"/> No
College / University	_____	_____	<input type="radio"/> Yes <input type="radio"/> No
Post Graduate	_____	_____	<input type="radio"/> Yes <input type="radio"/> No
Business / Trade	_____	_____	<input type="radio"/> Yes <input type="radio"/> No
Other	_____	_____	<input type="radio"/> Yes <input type="radio"/> No

WORK HISTORY - Last 3 Positions Held

1. EMPLOYER NAME & ADDRESS	REASON FOR LEAVING
_____	_____
_____	_____

Date of employment _____ to _____

Position / Job title _____

Duties / Responsibilities _____

2. EMPLOYER NAME & ADDRESS	REASON FOR LEAVING
_____	_____
_____	_____

Date of employment _____ to _____

Position / Job title _____

Duties / Responsibilities _____

3. EMPLOYER NAME & ADDRESS

REASON FOR LEAVING

Date of employment _____ to _____

Position / Job title _____

Duties / Responsibilities _____

REFERENCES - Preferably Supervisor / Manager

List the names of at least 3 persons we can contact for information pertinent to your job performance. *(Do not include the names of former co-workers or relatives)*

NAME	COMPANY / TITLE	PHONE NUMBER	E-MAIL ADDRESS	RELATIONSHIP TO APPLICANT
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____

DO YOU PARTICIPATE IN THE FOLLOWING ACTIVITIES?	EXTENSIVELY 20-30 times during the season	OFTEN 10-20 times during the season	OCCASIONALLY 1-10 times during the season
alpine climbing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
alpine touring	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
backcountry skiing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
backpacking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
canoe tripping	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
cross-country skiing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
cycling – off-road	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
cycling – road	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
cycle touring	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
ice climbing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
hiking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
rock climbing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
sea kayaking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
skate skiing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
snowboarding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
snowshoeing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
telemarking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
trail running	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
whitewater canoeing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
whitewater kayaking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other related interests _____

Do you have any other exerieence, skills, qualifications (such as outdoor certification) especially suited for working with us? Please explain below.

☐ I agree that Mountain Equipment Co-op can contact the above work history employers and references.

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge.
I understand that if employed, false statements on this application shall be considered sufficient cause of dismissal.

Signature of Applicant _____ Date _____

****Please attach a resume and cover letter***