



## Task Title: Grocery Store Job Application

OALCF Cover Sheet – Learner Copy

**Learner Name:** \_\_\_\_\_

**Date Started:** \_\_\_\_\_

**Date Completed:** \_\_\_\_\_

**Successful Completion:** Yes  No

**Goal Path:** Employment  Apprenticeship

Secondary School  Post Secondary  Independence

**Task Description:** The learner will enter basic information into a job application form.

### Main Competency/Task Group/Level Indicator:

- Find and Use Information/Interpret documents/A2.2
- Communicate Ideas and Information/Complete and create documents/B3.1a

### Materials Required:

- Pen/pencil and/or digital device

## Learner Information

Many companies ask prospective employees to fill out a job application. For stores with multiple shifts or departments, people may be asked to select times they are available for work or departments that interest them.

Scan the “Zehrs Application Form”.



**PLEASE TEAR OFF AND RETAIN THIS PORTION FOR YOUR INFORMATION.**

Please complete both sides of the application form. Resumés may be attached, but we will still require that all details of the application form be completed.

**MORE INFORMATION ON REVERSE**



A DIVISION OF ZEHRMART INC.

1 President's Choice Circle  
Brampton, Ontario L6Y 5S5



*APPLICATION FOR STORE EMPLOYMENT*

LAST NAME FIRST NAME MIDDLE INITIAL (AREA CODE) TELEPHONE #

ADDRESS APT. # CITY POSTAL CODE

AVAILABILITY - Please <b>INDICATE THE TIME</b> that you are available to work. (Start & Finish Time)						
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
-	-	-	-	-	-	-

Are you a student or non-student? Student  Non-Student

Are you available to work a variety of shifts on a regular basis? Yes  No  (Please specify below)

Days: Yes  No  Evenings: Yes  No  Weekends: Yes  No  Night Shift: Yes  No

Comments: \_\_\_\_\_

Please indicate the departments in which you are interested in working:

<input type="checkbox"/> Any Department	<input type="checkbox"/> Floral	<input type="checkbox"/> Dairy	<input type="checkbox"/> Hot Deli	<input type="checkbox"/> Produce
<input type="checkbox"/> Cashier	<input type="checkbox"/> Grocery	<input type="checkbox"/> Pharmacy	<input type="checkbox"/> Salad Bar	<input type="checkbox"/> Photolab
<input type="checkbox"/> General Merchandise	<input type="checkbox"/> Bulk Food	<input type="checkbox"/> Seafood	<input type="checkbox"/> Health & Beauty	<input type="checkbox"/> Night Crew
<input type="checkbox"/> Front- End Packer	<input type="checkbox"/> Bakery	<input type="checkbox"/> Cold Deli	<input type="checkbox"/> Meat	<input type="checkbox"/> Health Foods
<input type="checkbox"/> Community Room	<input type="checkbox"/> Bean Roast	<input type="checkbox"/> Cosmetics	<input type="checkbox"/> Other	

Do you have any specific skills, trades or experience in any of these departments? Please describe: \_\_\_\_\_

Have you ever been convicted of a criminal offense for which a pardon HAS NOT been granted? Yes  No

Are you legally entitled to work in Canada? Yes  No

Are you between the ages of 15 and 65? Yes  No

What source referred you to this company? \_\_\_\_\_

To which location are you applying? \_\_\_\_\_

Would you be willing to work at any other location(s) ? Please specify: \_\_\_\_\_

Date available to begin work : \_\_\_\_\_ Have you ever worked for any Loblaw Companies Ltd. banners or affiliates (eg. Loblaws, Zehrs, Fortinos, No Frills, YIG, RCSS, Atlantic Superstore, National Grocers, Provigo)?

Yes  No  If yes, specify date of employment From: \_\_\_\_\_ To: \_\_\_\_\_

Company & Location: \_\_\_\_\_

Department: \_\_\_\_\_ Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_

**PLEASE COMPLETE REVERSE**

# Task Title: GroceryStoreJobApplication\_E\_A2.2\_B3.1a

Thank-you for your interest in pursuing opportunities with Zehrs. We carefully screen, review and retain all applications for a period of six months. Due to the volume of applications received, we do not respond to telephone inquiries regarding the status of applications. If you have not been contacted, you may assume the position has been filled or there are no present vacancies, however, your resume will be maintained for future reference.

Zehrs hires part-time employees only. All full-time positions are posted within the company (exceptions for new stores only). Zehrs is a unionized company and there is no guarantee of part-time hours because hours are scheduled by seniority.

Zehrs may require you to work Sundays once you have declared your availability for Sunday work at the time of your hire.

Please be prepared to provide two references should you obtain an interview.

Again, we appreciate your interest in our company and stores.

Employee Development & Services Department  
Zehrs

Why do you want to work for Zehrs? \_\_\_\_\_

Describe what a customer means to you? \_\_\_\_\_

**EMPLOYMENT HISTORY:** Please list in order, your three most recent jobs OR those jobs most related to the position you are applying for.

Name & Address of Employer _____	
Job Title: _____	Period of Employment: From _____ To _____
Salary: _____	Reason For Leaving: _____
Supervisor Name: _____	Phone Number: _____
Functions/Responsibilities: _____	

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Job Title: _____	Period of Employment: From _____ To _____
Salary: _____	Reason For Leaving: _____
Supervisor Name: _____	Phone Number: _____
Functions/Responsibilities: _____	

**EMPLOYMENT REFERENCE:**

For employment references, may we contact your present / last employer? Yes  No

For employment references, may we contact your former employer(s)? Yes  No

**EDUCATIONAL BACKGROUND:**

Highest Primary/Secondary educational grade level completed \_\_\_\_\_

Post Secondary Education	Course Taken	Certificate/Degree Obtained
University Yes <input type="checkbox"/> No <input type="checkbox"/>		
Business College Yes <input type="checkbox"/> No <input type="checkbox"/>		
Trade School or Vocational School Yes <input type="checkbox"/> No <input type="checkbox"/>		
Correspondence Course(s) Yes <input type="checkbox"/> No <input type="checkbox"/>		

**TO BE READ AND SIGNED BY THE APPLICANT**

By signing this form, I consent to the Company using my personal information provided in this application for purposes relating to my hiring and, if hired, for purposes relating to my continued employment such as the administration of payroll, pension and employee benefits. I also consent to the Company disclosing only as much of this personal information as may be needed by third parties who provide services to the Company in connection with my employment, such as payroll, pension and benefits administration. I further consent to the collection, use and disclosure of any personal information provided to the Company for purposes relating to my continued employment, where required.

I understand that my personal information will be kept confidential and secure. I hereby authorize the Company to obtain a report or other written or verbal communication about me, for consideration in connection with my application for employment and to obtain credit and/or criminal record checks, where required.

I verify that all statements made in this application form, and those given during my employment interview(s) are true and correct and understand that any false statement shall disqualify me from employment or shall be considered just cause for my termination from employment.

Upon declaring my availability for Sunday work at the time of my hire, I understand that one of the conditions of my employment is to work on Sundays when required.

I hereby declare that the foregoing information is true and complete to my knowledge.

I understand that a false statement may disqualify me from employment, or be cause for my dismissal.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Approved by: \_\_\_\_\_

**CONDITIONAL OFFER**

If you have been provided with a verbal offer of employment, please note that such offer is conditional on you answering the question below and our medical department being satisfied that it is safe for you to handle food.

As food safety is a very important matter for our business, please advise us whether you presently have or ever had a communicable disease that would impair your ability to handle food: YES \_\_\_\_\_ NO \_\_\_\_\_ If you answered YES, please note that our medical department will have to discuss this matter with you in greater detail so that we can determine whether it would be safe for you to handle food.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

FORM #PT ADV #186 - (JOB APPLICATION 1005) Revised October 2005

## Work Sheet

**Task 1: Fill out the following sections of the application form using your own information, availability and preferences:**

- **Name, phone number and address**
- **Shift availability**
- **Departments of interest (select at least two)**
- **Previous experience**
- **Educational background**

**If you are uncomfortable using your own information, fill out the application form using the following information:**

- **Andrea Thompson, 519-555-1234, 246 Main Street  
Goderich Ontario N2Z 1Z1**
- **Available to work: Saturday and Sunday 8am-5pm**
- **Not available to work a variety of shifts**
- **Interested in: Seafood, cold deli, meat**
- **Previous work experience at a local coffee shop preparing food and serving customers**
- **High School completion (OSSD) in 2023**

Answer: No written response required here.

Task completed: Yes: