

Dear Applicant:

We are pleased that you are interested in employment at Bi-Mart! To be considered for possible employment, applications must be accompanied by a signed and dated summary of the position for which you are applying. Please review the position summary thoroughly before completing this application. This Application for Employment will be considered "active" for one (1) month from the date signed.

Bi-Mart is strongly committed to providing a safe and productive work environment for its employees and to providing excellent service to its customers. As a part of the hiring process, all applicants considered for employment are required to submit to and pass a drug test.

INSTRUCTIONS

- PLEASE ANSWER **ALL** QUESTIONS TO THE BEST OF YOUR ABILITY.
- **PRINT** LEGIBLY WITH AN **INK PEN** (OR YOU MAY TYPE THE ANSWERS IF YOU ARE COMPLETING AN ONLINE APPLICATION).
- **DO NOT** LEAVE BLANK SPACES—PRINT **N/A** (NOT APPLICABLE) WHEN NECESSARY.

AREA OF INTEREST & AVAILABILITY

POSITION SOUGHT: _____
FULL TIME PART-TIME TEMPORARY/SEASONAL
Have you previously applied for employment at Bi-Mart? YES NO
When? _____ For what position? _____ What location? _____

PAY EXPECTED: \$ _____ If "Negotiable", enter range: _____ Date you can start: _____
WE OPERATE 7-DAYS PER WEEK. PLEASE INDICATE WHAT HOURS YOU CAN WORK. WRITE "ANY" IF YOU ARE AVAILABLE ALL HOURS.

AVAILABLE HOURS: MON: _____ TUE: _____ WED: _____ THU: _____ FRI: _____ SAT: _____ SUN: _____

REFERRED BY: NEWSPAPER AD: _____ SCHOOL: _____ INTERNET: _____
(CHECK ONE) (Specify) (Specify) (Specify)

STORE ANNOUNCEMENT: COMPANY RECRUITER: OTHER (Explain): _____

PERSONAL INFORMATION

FULL NAME: _____ SS#: _____
(LAST) (FIRST) (FULL MIDDLE)

ALL OTHER LAST NAMES USED: _____ NICKNAME(S): _____

CONTACT INFORMATION: HOME PHONE #: _____ WORK PHONE #: _____
CELL PHONE #: _____ E-MAIL ADDRESS: _____

CURRENT MAILING ADDRESS: _____ **HOW LONG?** _____
(NO. & STREET) (CITY) (STATE) (ZIP CODE) (IF LESS THAN 3 YRS. PLEASE PROVIDE PREVIOUS ADDRESS)

CURRENT STREET ADDRESS: _____
(NO. & STREET) (CITY) (STATE) (ZIP CODE)

PREVIOUS STREET ADDRESS: _____ **HOW LONG?** _____
(NO. & STREET) (CITY) (STATE) (ZIP CODE)

AGE INFORMATION: ARE YOU 18 OR OLDER? YES: NO: IF HIRED, CAN YOU PROVIDE PROOF OF YOUR AGE? YES: NO:

DRIVER'S LICENSE OR STATE ISSUED ID: YES: NO: STATE: _____ NUMBER: _____ EXP. DATE: _____
(MM/DD/YYYY)

CITIZENSHIP: CAN YOU PROVIDE PROOF OF YOUR LEGAL RIGHT TO REMAIN AND WORK IN THE U.S.A.? YES: NO:

PREVIOUSLY EMPLOYED BY BI-MART?: YES: NO: IF YES, WHAT LOCATION/DEPT.: _____
NAME OF SUPERVISOR: _____ DATES EMPLOYED: _____
JOB TITLE: _____ SUPERVISOR: _____ EMPLOYED: _____

RELATIVE/FRIENDS CURRENTLY EMPLOYED BY BI-MART?: YES: NO: IF YES, NAME: _____ RELATIONSHIP: _____
LOCATION/DEPARTMENT: _____

EDUCATION

SCHOOLS ATTENDED	CIRCLE HIGHEST GRADE COMPLETED	WHAT NAME(S) ARE RECORDS UNDER?	DIPLOMA OR GED YES () NO ()
LAST JR. HIGH/MIDDLE SCHOOL: (City) (State)	1 2 3 4 5 6 7 8		
LAST HIGH SCHOOL: (City) (State)	9 10 11 12		
COLLEGE/UNIVERSITY OR TECHNICAL/TRADE OR MILITARY SCHOOLS ATTENDED: <small>(Include City and State)</small>	WHAT NAME(S) ARE RECORDS UNDER?	DEGREE OR CREDITS RECEIVED	MAJOR(S)
NAME: (City) (State)			
NAME: (City) (State)			
LIST ANY CURRENT LICENSES/CERTIFICATES/REGISTRATIONS: _____			
Are you currently attending school? NO <input type="checkbox"/> YES <input type="checkbox"/> Hours / Days attending: _____			

WORK EXPERIENCE

LIST YOUR MOST RECENT JOB FIRST—APPLICANTS MUST PROVIDE A COMPLETE RECORD OF **ALL EMPLOYMENT IN THE LAST 15 YEARS** INCLUDE MILITARY SERVICE. AND INDICATE DATES AND REASONS FOR PERIODS OF UNEMPLOYMENT IN EXCESS OF THIRTY (30) DAYS. **USE ADDITIONAL SHEETS IF NEEDED.**

# 1	DATE EMPLOYED (Month & Year)	COMPANY/ORGANIZATION (Complete Name & Address)	JOB TITLE/DUTIES PERFORMED AT START OF EMPLOYMENT	JOB TITLE/DUTIES PERFORMED AT END OF EMPLOYMENT		
	/ MO YR / MO YR <small>(FROM) (TO)</small> TYPE OF BUSINESS? <input style="width: 100%; height: 20px;" type="text"/>	(Name) (Street address) (City) (State) (Zip)				
	HOW WAS POSITION OBTAINED?	AVG. HRS. WORKED PER WEEK	SALARY AT START UPON LEAVING	NUMBER OF PEOPLE YOU SUPERVISED	REASON FOR LEAVING OR LOOKING TO LEAVE (BE SPECIFIC)	IMMEDIATE SUPERVISOR
						NAME: _____ TITLE: _____ PHONE #: _____ MAY WE CONTACT NOW? YES <input type="checkbox"/> NO <input type="checkbox"/>

# 2	DATE EMPLOYED (Month & Year)	COMPANY/ORGANIZATION (Complete Name & Address)	JOB TITLE/DUTIES PERFORMED AT START OF EMPLOYMENT	JOB TITLE/DUTIES PERFORMED AT END OF EMPLOYMENT		
	/ MO YR / MO YR <small>(FROM) (TO)</small> TYPE OF BUSINESS? <input style="width: 100%; height: 20px;" type="text"/>	(Name) (Street address) (City) (State) (Zip)				
	HOW WAS POSITION OBTAINED?	AVG. HRS. WORKED PER WEEK	SALARY AT START UPON LEAVING	NUMBER OF PEOPLE YOU SUPERVISED	REASON FOR LEAVING OR LOOKING TO LEAVE (BE SPECIFIC)	IMMEDIATE SUPERVISOR
						NAME: _____ TITLE: _____ PHONE #: _____ MAY WE CONTACT NOW? YES <input type="checkbox"/> NO <input type="checkbox"/>

WORK EXPERIENCE CONTINUED

#3	DATE EMPLOYED (Month & Year) MO / YR / MO / YR (FROM) (TO) TYPE OF BUSINESS? <input style="width:100%; height:20px;" type="text"/>	COMPANY/ORGANIZATION (Complete Name & Address) _____ (Name) _____ (Street address) _____ (City) (State) (Zip)	JOB TITLE/DUTIES PERFORMED AT START OF EMPLOYMENT	JOB TITLE/DUTIES PERFORMED AT END OF EMPLOYMENT	
HOW WAS POSITION OBTAINED?	AVG. HRS. WORKED PER WEEK	SALARY AT START UPON LEAVING	NUMBER OF PEOPLE YOU SUPERVISED	REASON FOR LEAVING OR LOOKING TO LEAVE (BE SPECIFIC)	IMMEDIATE SUPERVISOR NAME: _____ TITLE: _____ PHONE #: _____ MAY WE CONTACT NOW? YES <input type="checkbox"/> NO <input type="checkbox"/>

#4	DATE EMPLOYED (Month & Year) MO / YR / MO / YR (FROM) (TO) TYPE OF BUSINESS? <input style="width:100%; height:20px;" type="text"/>	COMPANY/ORGANIZATION (Complete Name & Address) _____ (Name) _____ (Street address) _____ (City) (State) (Zip)	JOB TITLE/DUTIES PERFORMED AT START OF EMPLOYMENT	JOB TITLE/DUTIES PERFORMED AT END OF EMPLOYMENT	
HOW WAS POSITION OBTAINED?	AVG. HRS. WORKED PER WEEK	SALARY AT START UPON LEAVING	NUMBER OF PEOPLE YOU SUPERVISED	REASON FOR LEAVING OR LOOKING TO LEAVE (BE SPECIFIC)	IMMEDIATE SUPERVISOR NAME: _____ TITLE: _____ PHONE #: _____ MAY WE CONTACT NOW? YES <input type="checkbox"/> NO <input type="checkbox"/>

#5	DATE EMPLOYED (Month & Year) MO / YR / MO / YR (FROM) (TO) TYPE OF BUSINESS? <input style="width:100%; height:20px;" type="text"/>	COMPANY/ORGANIZATION (Complete Name & Address) _____ (Name) _____ (Street address) _____ (City) (State) (Zip)	JOB TITLE/DUTIES PERFORMED AT START OF EMPLOYMENT	JOB TITLE/DUTIES PERFORMED AT END OF EMPLOYMENT	
HOW WAS POSITION OBTAINED?	AVG. HRS. WORKED PER WEEK	SALARY AT START UPON LEAVING	NUMBER OF PEOPLE YOU SUPERVISED	REASON FOR LEAVING OR LOOKING TO LEAVE (BE SPECIFIC)	IMMEDIATE SUPERVISOR NAME: _____ TITLE: _____ PHONE #: _____ MAY WE CONTACT NOW? YES <input type="checkbox"/> NO <input type="checkbox"/>

- USE ADDITIONAL SHEETS IF NEEDED -

ABILITIES

After reviewing the position summary for the job(s) for which you are applying, do you believe that you can perform all of the functions listed? YES NO

If no to the above, please identify any functions of the job which you are unable to perform and describe how you might be able to perform the job with reasonable accommodation(s):

BACKGROUND

TERMINATION: Have you ever been discharged or asked to resign from a job?

YES NO If yes, please explain: _____

***CONVICTIONS:** Have you ever been convicted by a criminal or military court of a felony or misdemeanor, including criminal traffic and criminal non-traffic offenses?

YES NO If yes, please explain: _____

*In most cases, a conviction is not an automatic bar from employment.

SKILLS AND INTERESTS

DO NOT include the names of clubs, organizations, associations, etc., which indicate the race, creed, religion, age, national origin, political views or any other protected class of its members.

List outside activities while in school (athletics, clubs, offices held):

Related hobbies/interests:

List technical/occupational skills (include level of proficiency):

Personal aptitudes/interests:

Career aims/goals:

COMMENTS

MAKE ANY ADDITIONAL COMMENTS YOU WISH IN THE SPACE BELOW:

ACCEPTANCE

It is the policy of Bi-Mart to recruit, employ, transfer, develop and promote individuals without regard to race, national origin, ancestry, religion, age, sex, gender identity, marital status, disability, or any other protected class as provided by law.

1. I declare that all statements and answers herein are true and complete, and understand that any untruth, misleading answer, omission, concealment, or failure to answer questions fully, completely, and accurately are grounds for termination of my employment.
2. I authorize Bi-Mart at any time to investigate my references, to communicate with former employers concerning same, and to make an independent investigation of my character, conduct, employment, criminal, financial, and driver's records.
3. I agree that Bi-Mart, my previous employers and any other sources used in this investigation shall not be held liable in any respect if an employment offer is not tendered, is withdrawn, or my employment is terminated due to false statements or answers in this application or any other information gained in this investigation.
4. I agree to return all company records, equipment, and uniforms upon termination of employment.
5. I understand that this application for employment is not a contract of employment. All employment at Bi-Mart is strictly "Employment At Will" which means that an employee may voluntarily end his/her employment at any time with or without notice for any reason, and the company maintains the same right. This relationship cannot be modified by anyone other than in writing by the Senior Vice President of Human Resources or the President of the Company. Any representations by any other person contrary to the "Employment At Will" Doctrine, either verbal or written, shall not be relied upon by any employee.

(SIGNATURE OF APPLICANT)

DATE

**BUSINESS OFFICE AND DISTRIBUTION CENTER
220 S. SENECA RD. • P.O. BOX 2310 • EUGENE, OREGON 97402
PHONE 541/344-0681 • FAX 800/333-8967**

COMPUTER OPERATOR/HELP DESK

Position Overview

This position provides help desk support to store level Pharmacy & Store Point of Sale Systems and to corporate PC users. Operates computers on the local area network to process daily production jobs.

- Reports to: Help Desk Manager
- Coordinates with: system users at stores, business office and various employees from the IS department.

Essential Job Functions

- Provide excellent customer service
- Monitor job processing
- Running job processing
- Provide phone support to users (corporate/stores)
- Trouble shoot computer problems
- Communicate effectively over the telephone and through email

Physical Requirements

Occasionally = up to 1/3 shift

Frequently = up to 2/3 shift

Continuously = throughout shift

- Standing: Occasionally in combination with walking.
- Sitting: 90% of the time.
- Walking: Occasionally in combination with standing.
- Carry/Lift: Occasionally and independently work with 0-30 pounds depending on product and materials.
- Worker Mobility: Can change positions occasionally throughout the shift.
- Pushing/Pulling: Occasionally and independently push/pull cases of paper, and move monitors, printers, keyboards, etc. with/without the use of a handcart.
- Bending/squatting: Occasionally throughout the shift while setting up computer terminals, printers, or monitors.
- Reaching/Handling: Use of fingers/hands/arms continuously throughout shift.

- Grasping/Squeezing: Occasionally to fill printers/copies with paper, change printer cartridges and attach computer cables.
- Twisting: Occasionally throughout the shift.
- Climbing: Occasionally climb ladders to reach higher shelf areas. Frequently climb stairs to reach other areas.
- Crawling: 10% of the time when setting up computer terminals.

Social Skill Requirements

- Ability to positively interact with others.
- Ability to communicate well verbally and in writing using the English language.

Aptitude Requirements

- Workers must be able to read and write English legibly.
- Must be able to perform basic and intermediate math functions.
- Must have ability to analyze, reason, and make decisions.
- Must be able to learn and retain new skills.

Environmental Factors

- Most work is performed in the business office.

This position summary covers most of the duties performed, however, other duties and responsibilities not listed may be assigned at the discretion of management.

After reviewing this position summary, can you perform all of the functions listed? **Yes** **No**

If no to the above, please identify any functions that you are unable to perform:

I verify that I have thoroughly reviewed the position summary for Computer Operator/Help Desk and that I understand the job requirements and essential job functions.

Signature: _____ Date: _____

Print Name: _____