

ENTERED
4/8/15



CMG APPLICATION FOR EMPLOYMENT

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS AND A BACKGROUND CHECK WILL BE COMPLETED

PLEASE COMPLETE PAGES 1-5 DATE April 8th, 2015

Name Thornton Darrell Ray
Last First Middle Maiden

Present address 103 10th St. N.W.
Number Street
Rochester Mn 55901
City State Zip

Social Security No. 264 - 21 - 3783

Telephone 507 244-1693 E-Mail pair of vtwins@hotmail.com

If under 18, please list age _____ Referred by _____

Position applied for (1) <u>Trailer Shuttle, warehouse</u> and salary desired (2) _____ (Be specific)	Shift available to work 1 st _____ 2 nd <input checked="" type="checkbox"/> <u>5:00 - 11:00 (\$ or 2.00)</u> 3 rd _____
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How many hours can you work weekly? _____ Can you work nights? _____

Employment desired ___ FULL-TIME ONLY ___ PART-TIME ONLY FULL- OR PART-TIME

When available for work? _____

Do you have responsibilities or commitments that will prevent you from meeting specified work schedules?
 No ___ Yes If so, please explain _____

Do you anticipate any absences from work on a regular basis?
 No ___ Yes If so, please explain _____

2009

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School	<u>Westerly HS</u>	<u>303 S. Otterbein Ave Westerly, Oh 43081</u>	<u>3</u>	
College				
Bus. or Trade School				
Professional School				

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APPLICATION FOR EMPLOYMENT

DO YOU HAVE A DRIVER'S LICENSE? Yes ___ No

What is your means of transportation to work? Automobile

Driver's license number R838190482019 State of issue Mn.

Operator ___ Commercial (CDL) Chauffeur ___

Expiration date 01/16/2016

Have you had any accidents during the past three years? ___ Yes No

If so, how many? 0

Have you had any moving violations during the past three years? ___ Yes No

If so, how many? 0

Please list two references other than relatives or previous employers.

Name Rob Keller Name Chris Mielke

Position neighbor (Spray Painter) Position Optometrist

Company Crenlo Company Mayo Clinic

Address 102 N.W. 10th st. Address _____

Rochester 55901 _____

Telephone (507) 258-4258 Telephone (507) 421-8900

APPLICATION FOR EMPLOYMENT

MILITARY

HAVE YOU EVER BEEN IN THE ARMED FORCES? Yes ___ No

ARE YOU NOW A MEMBER OF THE RESERVE OR NATIONAL GUARD? ___ Yes No

Branch Air Force Specialty _____

Date Entered 01/20/1975 Discharge Date 04/22/1976

WORK EXPERIENCE

Please list your work experience for the **past five years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name <u>Lawrence Transportation</u>	Supervisor name <u>Stacy + or Laci</u>	
Position <u>Over the road driver</u>	Employment dates	Pay or salary
Company _____	From <u>June 2014</u>	Start <u>.46 per mile, .36 per mile</u>
Address _____	To _____	Final <u>then .40 per mile</u>
Telephone <u>(800) 328-7224</u>	Your last job title <u>OTR driver</u>	
Reason for leaving (be specific) <u>When I first started the money actually was worth my never being home</u>		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company.		

*worth
my never being home
Laci + Stacy*

Name <u>Gator (Grea)</u>	Supervisor name _____	
Position <u>Safety director</u>	Employment dates	Pay or salary
Company <u>California - Overland</u>	From _____	Start _____
Address _____	To _____	Final _____
Telephone () _____ <u>I haven't his phone # with</u>	Your last job title _____	
Reason for leaving (be specific) _____		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company.		

*under 1 yr
10/ month
OTR*

*Archives & → 2011 - company -
April 2009
OS → 2000*