

CORPORATE MANAGEMENT GROUP

Employment Application

Office Hours: 9am-4pm Mon-Thur, 9am-3pm Fri

Office Number: 507-923-4955

Office Address: 3707 Commercial Dr. SW Rochester, MN 55902



Applicant Information

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

Please fully complete pages 1-3

Full Name: (Last Name, First Name) CRUZ Olga Marina Date: 10/11/2021

Address: (Street Address) 919 W. Village Circle SW (Apt. /Unit #) _____

(City) Rochester (State) MN (ZIP Code) 55904

Phone: 507 5088153 Email: _____

Social Security No. 641-26-4792 Date Available: ASAP.

Position Applied for: line worker Desired Salary: 15/hr

Shift Available to work: ___ 1st 2nd ___ 3rd Employment desired: Full-Time Part-Time

Are you authorized to work in the U.S? Yes ___ No

How did you hear about us? friend Referral Name: JUANA ARTIAGA

If under 18, please list age: _____

Do you have responsibilities or commitments that will prevent you from meeting specified work schedules? No ___ Yes

Education				
Type of School	Name of School	Location (Complete Mailing Address)	Number of Years Completed	Major & Degree
High School	<u>Flema Roja</u>	<u>Guatemala</u>	<u>8</u>	
College				
Bus. Or Trade School				
Professional School				

