



Case Verification Number: 2018192181239

Report prepared: 07/11/2018



Company Information

Company ID: 1284996

Company Name:
Management Group

Client Company ID: 1284996

Client Company Name: ESSG - Corporate
Management Group

Employee Information

Name: Eidle B. Gelle

Date of Birth: 01/01/1979

U.S. Social Security Number: ***-**-8403

Employee's First Day of Employment:
07/11/2018

Citizenship Status: Alien Authorized to Work

Alien/USCIS Number: A212497789

Document Information

List A Document: Employment Authorization Document (Form I-766)

Document Number: LIN1706750941

Expiration Date: 01/11/2019

Case Information

Current Case Result: Closed

Case Submitted By: Sierra Peterson

Case Status: Employment Authorized

Reason for Closure: Employment Authorized
Auto Close

7/11 12:30p



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

ENTERED

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) Gelle Eidle Bulal Date: _____

Address: (Street Address) 3023 20th St (Apt./Unit #) 3023

(City) Rochester MN (State) MN (ZIP Code) 55901

Phone: 8134527615 Email: _____

Social Security No. 843 01 2402 Date Available: Right away

Position Applied for: Food Production Desired Salary: _____

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? on online Referral Name: _____

If under 18, please list age: 0

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

18 SOUTH

Education				
Type of School	Name of School	Location (Complete Mailing Address)	Number of Years Completed	Major & Degree
High School	<u>0</u>			
College	<u>0</u>			
Bus. Or Trade School	<u>0</u>			
Professional School	<u>0</u>			

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Previous Employment

Company: Afiya Home Care Phone: 507 272 8567

Address: _____ Supervisor: _____

Job Title: Home Care Starting Salary: \$ 12.50 Ending Salary: \$ 17.50

Responsibilities: _____

From: 11-30-17 To: _____ Reason for Leaving: Still working

May we contact your previous supervisor for reference? Yes No

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for reference? Yes No

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for reference? Yes No

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for reference? Yes No

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: [Signature]

Date: 7-9-18

7-9-18

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PLEASE READ CAREFULLY APPLICATION FORM WAIVER

In exchange for the consideration of my job application by Corporate Management Group, Inc.,

I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements and the like as they may exist from time to time, or other company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Corporate Management Group, Inc. (CMG), or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by an officer of CMG. Both the undersigned and CMG may end the employment relationship at any time, without specified notice or reason. If employed, I understand that CMG may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts will result in my disqualification from consideration for employment or, if discovered after I begin employment, will result in my termination. I hereby give CMG permission to contact schools, all previous employers (unless otherwise indicated), references and others and hereby release CMG from any liability as a result of such contact.

I understand that a comprehensive background check may be conducted to determine my eligibility for hire by CMG. This may include but is not limited to, investigations of criminal and/or conviction records, driving records and/or a drug screen test as required by clients, government regulations or by CMG policies.

I release CMG and other persons or entities from any claims that might be based on CMG's decision to conduct a background check.

I understand that, in connection with the routine processing of your employment application, CMG may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics and mode of living. Upon written request from me, CMG will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with CMG shall be probationary for a period of ninety (90) days and further that at any time during the probationary period or thereafter, my employment relationship with CMG is terminable at will for any reason by either party.

Signature of applicant  Date: 7-9-2018



Preliminary Questions

For CMG use only

Name: Eddie Gelle

Date: 7/11/18

1. If hired are you willing to take a drug test? Y
2. Do you have any known food allergies to soy, wheat, peanuts, or milk? NO
3. Are you able to work with pork? Y
4. Which plant do you prefer? South North
5. What shift to you prefer? 2nd 2pm.

To be completed during or after interview

Date of interview 7/11/18

X Have you ever been convicted of a crime? Yes _____ No _____

Explain

Incident _____

X Employee Signature _____

Interviewer Signature [Signature]



New Employee Acknowledgement Form

Welcome to CMG and Reichel Foods!

As a new employee, you will be provided with the website, username and password to view the new hire forms that you signed during your CMG interview. Please sign and date the bottom of the sheet stating that you received your login information.

CMG/ ESSG / Reichel Foods Handbook

Healthcare Notice of Exchange and Website for Enrollment

Safety Policy

Drug and Alcohol Testing Policy

Website: <https://nho.esgazure.com/login/cmg>

Login Name: 813452 7615

Login Password: Eg@8403

I hereby acknowledge that I have been provided with the login information to view the items listed above. I understand that it is my responsibility to read and follow each document provided to me and that if I have any questions concerning the times or its content, that it is my responsibility to address my questions with my supervisor or CMG representative, and hereby waive any claim, now or in the future, that I did not receive, did not read or did not comprehend the items or their contents.

Signature:  Date: 7-11-2018