

**SENSITIVE BUT UNCLASSIFIED**

**Department of Homeland Security**  
**E-Verify**

**Report Prepared: 05/13/2015**  
**Page: 1 of 1**

**Case Verification Number: 2015133112701UC**

**Case Information:****Employee Information:**

Last Name:	Haji	First Name:	Said
Middle Initial:		Other Names Used:	
Social Security Number:	*** ** 9494	Date of Birth:	07/21/1974
Citizenship Status:	A citizen of the United States	Email Address:	

**Document Information:**

List B Document:	ID card issued by a U.S. federal, state or local government agency	List C Document:	Social Security Card
Alien Number:		I-94 Number:	

**Additional Information:**

Hire Date:	05/13/2015	Employer Case ID:	
Three-Day Rule Reason:		Three-Day Rule - Other:	
Submitted By:	ESAG6409	Submitted On:	05/13/2015

**Initial Case Result:**

Case Result: Employment Authorized

**Employee Referred to SSA:**

Referred By: Referred On:

**Case Result from SSA (after SSA Tentative Nonconfirmation):**

Case Result: Response Date:

**Resubmitted to SSA (after Review and Update Employee Data):**

Last Name:		First Name:	
Middle Initial:		Other Names Used:	
Social Security Number:		Date of Birth:	
Resubmitted By:		Resubmitted On:	

**Case Result from SSA (after Resubmission):**

Case Result:

**Request Name Review:**

Comments:  
Submitted By: Submitted On:

**Case Result from DHS (after DHS Verification in Process):**

Case Result: Response Date:

**Employee Referred to DHS:**

Referred By: Referred On:

**Case Result from DHS (after DHS Tentative Nonconfirmation):**

Case Result: Response Date:

**Photo Matching Results:**

Determination:

**Employee Referred to DHS (Additional):**

Referred By:

Referred On:

**Case Result from DHS (after Additional DHS Tentative Nonconfirmation):**

Case Result:

Response Date:

**Case Closure:**

Closure Statement:

The employee continues to work for the employer after receiving an Employment Authorized result.

Closed By:

ESAG6409

Closed On:

05/13/2015

---

---

**SENSITIVE BUT UNCLASSIFIED**

ENTERED  
5/13/15



## CMG APPLICATION FOR EMPLOYMENT

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

PLEASE COMPLETE PAGES 1-5

DATE \_\_\_\_\_

Name Haji Said Omar

Last First Middle Maiden

Present address 1426 4th AV SE #310  
Number Street  
Rochester MN 55904  
City State Zip

Social Security No. 828-29-9494

Telephone ~~507-271-1113~~ 507-319-7130 E-Mail \_\_\_\_\_

If under 18, please list age \_\_\_\_\_

Referred by \_\_\_\_\_

Position applied for (1) open

and salary desired (2) Open  
(Be specific)  
2nd Shift

Shift available to work

1st \_\_\_\_\_

2nd

3rd

*Wknds  
OK KS 5/13*

How many hours can you work weekly? 96 Can you work nights? YES

Employment desired \_\_\_ FULL-TIME ONLY \_\_\_ PART-TIME ONLY  FULL- OR PART-TIME

When available for work? Anytime

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 \_\_\_\_\_

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Professional School				

APPLICATION FOR EMPLOYMENT

DO YOU HAVE A DRIVER'S LICENSE?  Yes \_\_\_ No

What is your means of transportation to work? Van

Driver's license number L882130141318 State of issue 1-2015

Operator \_\_\_ Commercial (CDL) \_\_\_ Chauffeur \_\_\_

Expiration date \_\_\_\_\_

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

If so, how many? \_\_\_\_\_

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

If so, how many? \_\_\_\_\_

Please list two references other than relatives or previous employers.

Name Anab Hussein Name \_\_\_\_\_

Position Protection Position \_\_\_\_\_

Company CMG Company \_\_\_\_\_

Address 1426 4<sup>th</sup> Av SE Address \_\_\_\_\_

#310 \_\_\_\_\_

Telephone (507)2714713 Telephone (\_\_\_\_) \_\_\_\_\_

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 \_\_\_\_\_ Specialty \_\_\_\_\_

Date Entered \_\_\_\_\_ Discharge Date \_\_\_\_\_

**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>Home health care</u>	Supervisor name _____	
Position <u>Caring</u>	Employment dates	Pay or salary
Company <u>Shippo home health care</u>	From <u>10-20-2014</u>	Start <u>11.00</u>
Address _____	To <u>still yet</u>	Final <u>11.00</u>
Telephone <u>(909) 289 5801</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.

*Help patients,  
Looking to replace. PT*

Name _____	Supervisor name _____	
Position _____	Employment dates	Pay or salary
Company _____	From	Start
Address _____	To	Final
Telephone (____) _____	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.

**APPLICATION FOR EMPLOYMENT**

**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 _____	Supervisor name _____	
Position _____	Employment dates	Pay or salary
Company _____	From	Start
Address _____	To	Final
Telephone (____) _____	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.		

Name _____	Supervisor name _____	
Position _____	Employment dates	Pay or salary
Company _____	From	Start
Address _____	To	Final
Telephone (____) _____	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.		

May we contact your present employer? \_\_\_ Yes \_\_\_ No

Did you complete this application yourself \_\_\_ Yes \_\_\_ No

If not, who did? \_\_\_\_\_

**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 Said HAJI Date: 5/11/2013

# MINNESOTA

## INSTRUCTION PERMIT



SAID OMAR HAJI  
1426 4TH AVE SE #310  
ROCHESTER, MN 55904

Date of Birth 07-21-1974  
Sex M Eyes BLK Class IP  
Height 6-8 Weight 170

ISSUED 01-2015

EXPIRES 12-31-2016

Said Haji

L882130141318

**SOCIAL SECURITY**

828-29-9494

THIS NUMBER HAS BEEN ESTABLISHED FOR

SAID OMAR HAJI

Said Haji

SIGNATURE

06/12/2017

U.S. DEPARTMENT OF SOCIAL SECURITY



## Preliminary Questions

For CMG use only

Name: Said Haji

Date: 5/13/15

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

**\*To be completed during interview only\***

Date of interview 5/13/15

→ Have you ever been convicted of a crime? Yes  No

Explain

Incident \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

→ Employee Signature Said HAJI

Interviewer Signature Kelsey Adell



# Applicant Interview Score Card

Name Said Date of Interview 5/13

Position/Shift Assignment 2(S) Stand by Position \_\_\_\_\_

Rating Weak (1) to Strong (5)

- 1. Understanding of English conversation 1 2 3 4 5
- 2. Speaks English Fluently 1 2 3 4 5
- 3. Work experience related to job-food industry 1 2 3 4 5
- 4. Work history-working presently, yrs in workforce 1 2 3 4 5
- 5. Criminal Background information 1 2 3 4 5
- 6. Possesses required New Hire documentation (I9) 1 2 3 4 5
- 7. Personality-friendly, pleasant, sense of humor 1 2 3 4 5
- 8. Appearance-well groomed, cleanliness 1 2 3 4 5
- 9. Meets requirements to work w/pork, peanuts & soy 1 2 3 4 5
- 10. Shift availability-prefers shift that is available for  
Open positions, willing to be flexible to shifts available 1 2 3 4 5

Total possible points **50** pts. Total points scored

48

Former Employer Rating Bonus Points 1-20

0

Interviewer: Kelso  
Date: 5/13

Total Points 48

Name: \_\_\_\_\_

# Achoo!

by Cynthia Sherwood

Achoo! We all sneeze sometimes. Sneezing is a reflex that your body does automatically. That means you cannot make yourself sneeze or stop one once it has started. When you sneeze, your body is trying to get rid of bad things in your nose, such as bacteria. You have extra germs when you have a cold, so you sneeze a lot more. You might also sneeze when you smell pepper!

Inside your nose, there are hundreds of tiny hairs. These hairs filter the air you breathe. Sometimes dust and pollen find their way through these hairs and bother your nasal passages. The nerves in the lining of your nose tell your brain that something is invading your body.

Your brain, lungs, nose, mouth, and the muscles of your upper body work together to blow away the invaders with a sneeze. When you sneeze, germs from your nose get blown into the air. Using a tissue or "sneezing into your sleeve" captures most of these germs. It is very important to wash your hands after you sneeze into them, especially during cold and flu season.



Do you ever sneeze when you walk into bright sunlight? Some people say that happens to them often. Scientists believe the UV rays of the sun irritate the nose lining of these people so they sneeze.

If someone nearby sneezes, remember to tell them "Gesundheit!" That is a funny-looking word which is pronounced "gezz-oont-hite." It is the German word that wishes someone good health after sneezing.

Name: Said HAJI

## Achoo Reading Test

(Circle the correct answer)

1. Why do people sneeze?
  - a. The tiny hairs in your nose tickle
  - b. Your body is trying to get rid of bad things
  - c. You can make yourself sneeze when you want to
  
2. What are the 3 parts of your body work together with your upper body to sneeze?
  - a. Hand, Elbow, Shoulder
  - b. Ankle, Knee, Hip
  - c. Brain, Lungs, Mouth
  
3. What other things can make you sneeze?
  - a. Pepper, Sun, Dust, and Pollen
  - b. Water, Pop, Flowers, Trees
  - c. Salt, Seasonings, Meat, Fruit
  
4. What is a German word that people often say to someone that sneezes?
  - a. Good Job
  - b. Gesundheit
  - c. Hang in there
  
5. What should you do after you sneeze into your hands especially during cold and flu season? This should also be done in the production area!
  - a. Wipe them with a tissue
  - b. Nothing
  - c. Wash your hands