

**SENSITIVE BUT UNCLASSIFIED**

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

**Report Prepared: 09/11/2015**  
**Page: 1 of 1**

**Case Verification Number: 2015254103848XX**

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

Last Name:	Kheng	First Name:	Dalinna
Middle Initial:		Other Names Used:	
Social Security Number:	*** ** 5071	Date of Birth:	03/21/1993
Citizenship Status:	A lawful permanent resident	Email Address:	

**Document Information:**

List A Document:	Permanent Resident Card or Alien Registration Receipt Card (Form I-551)		
Card Number:	IOE5194032848	Document Expiration Date:	
Alien Number:	064090512	I-94 Number:	

**Additional Information:**

Hire Date:	09/11/2015	Employer Case ID:	
Three-Day Rule Reason:		Three-Day Rule - Other:	
Submitted By:	GLEN1037	Submitted On:	09/11/2015

**Initial Case Result:**

Last Name (in DHS records):	KHENG	First Name (in DHS records):	DALINNA
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Document Expiration Date (in  
DHS records):

Case Result: Employment Authorized

**Employee Referred to SSA:**

Referred By:	Referred On:
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**Case Result from SSA (after SSA Tentative Nonconfirmation):**

Case Result:	Response Date:
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**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:
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**Employee Referred to DHS:**

Referred By:	Referred On:
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**Case Result from DHS (after DHS Tentative Nonconfirmation):**

Case Result:

Response Date:

**Photo Matching Results:**

Determination:

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

Referred By:

Referred On:

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

Case Result:

Response Date:

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**Case Closure:**

Closure Statement:

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

Closed By:

GLEN1037

Closed On:

09/11/2015

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**SENSITIVE BUT UNCLASSIFIED**



## CMG APPLICATION FOR EMPLOYMENT

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

DATE 09/08/2015

PLEASE COMPLETE PAGES 1-5

Name KHENG, DALINNA  
Last First Middle Maiden

Present address 2706 62nd St. NW  
Number Street  
Rochester MN 55901  
City State Zip

Social Security No. 802-35-5071

Telephone (507) 261-4475

E-Mail Leang99@yahoo.com

Referred by Chanthy Khith

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

Position applied for (1) production

and salary desired (2) \_\_\_\_\_  
(Be specific)

Shift available to work  
 1<sup>st</sup>  \_\_\_\_\_  
 2<sup>nd</sup> \_\_\_\_\_  
 3<sup>rd</sup> \_\_\_\_\_

How many hours can you work weekly? 40+ Can you work nights? prefer 1<sup>st</sup> shift.

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

When available for work? ASAP

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

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

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School	Phnom Penh High	Cambodia	4	Diploma
College	n/a			
Bus. or Trade School	n/a			
Professional School	n/a			

HAVE YOU EVER BEEN CONVICTED OF A CRIME?  No  Yes

If yes, explain number of conviction(s), nature of offense(s), dates of conviction(s), sentence(s) imposed, and type(s) of rehabilitation. n/a

APPLICATION FOR EMPLOYMENT

DO YOU HAVE A DRIVER'S LICENSE?  Yes  No

What is your means of transportation to work? Share ride with relative & husband

Driver's license number n/a State of issue n/a

Operator  Commercial (CDL)  Chauffeur

Expiration date n/a

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

If so, how many? n/a

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

If so, how many? n/a

Please list two references other than relatives or previous employers.

Name Yan Poun

Name Samnang Beth

Position Production

Position Production

Company Reichel Foods

Company Reichel Food

Address \_\_\_\_\_

Address \_\_\_\_\_

Rochester, MN 55901

Rochester, MN 55901

Telephone 507, 254 9150

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 n/a Specialty n/a

Date Entered n/a Discharge Date n/a

**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 _____ Position _____ Company _____ Address _____ Telephone (____) _____	Supervisor name _____	
	Employment dates	Pay or salary
	From	Start
	To	Final
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 _____ Position _____ Company _____ Address _____ Telephone (____) _____	Supervisor name _____	
	Employment dates	Pay or salary
	From	Start
	To	Final
Your last job title _____		
Reason for leaving (be specific) _____		
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## APPLICATION FOR EMPLOYMENT

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Employment dates	Pay or salary						
From	Start						
To	Final						
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.							

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Employment dates	Pay or salary						
From	Start						
To	Final						
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

*n/a*  
Did you complete this application yourself \_\_ Yes  No

If not, who did? LEANG MOUN

**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

Kheng Dalima

Date:

09/08/2015



SENSITIVE BUT UNCLASSIFIED

**Case Verification Number: 2018051112650DC**

Report Prepared: 02/20/2018

**Company Information**

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Company ID: 47429

Company Name: Employer Solutions Staffing Group

**Employee Information**

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Last Name: Kheng

First Name: Dalinna

Date of Birth: 03/21/1993

Social Security Number: \*\*\* \*\* 5071

Hire Date: 02/20/2018

Citizenship Status: A lawful permanent resident

**Document Information**

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List A Document: Permanent Resident Card or Alien Registration Receipt Card (Form I-551)

Alien Number: 064090512

Card Number: IOE5194032848

Document Expiration Date:

**Case Status Information**

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Final Case Result: Employment Authorized

Employer Case ID:

Case Submitted On: 02/20/2018

Case Submitted By: SHAU7624

Closed On: 02/20/2018

Closed By: SHAU7624

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

SENSITIVE BUT UNCLASSIFIED

# 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

Tuesday @ 9:30A.

### 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) Kheng Dalinna Date: 01/12/2018

Address: (Street Address) 1536 10TH AVE. SE (Apt. /Unit #) 2

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

Phone: (507) 2505441 Email: leang99@yahoo.com

Social Security No. 802-35-5071 Date Available: 02/17/2018

Position Applied for: Production Associate Desired Salary: \_\_\_\_\_

Shift Available to work: 1<sup>st</sup>  2<sup>nd</sup>  3<sup>rd</sup>  Employment desired:  Full-Time  Part-Time

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

How did you hear about us? former Employee Referral Name: \_\_\_\_\_

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

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

2nd shift  
 Rehire.  
 weekends or sp 2/12/18

Education				
Type of School	Name of School	Location (Complete Mailing Address)	Number of Years Completed	Major & Degree
High School		Cambodia	4	High School Diploma
College				
Bus. Or Trade School				
Professional School				

# 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

### Previous Employment

Company: Reichel Foods Phone: (507) 289-7264

Address: 3706 Enterprise Dr. SW Supervisor: \_\_\_\_\_

Job Title: Production Line Starting Salary: \$10.00 Ending Salary: \$10.70

Responsibilities: production assembly

From: 9/2014 To: 01/15/18 Reason for Leaving: maternity leave then voluntarily quit

May we contact your previous supervisor for reference?  Yes  No

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

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

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: [Handwritten Signature] Date: 02/20/18

# CORPORATE MANAGEMENT GROUP

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Office Number: 507-923-4955

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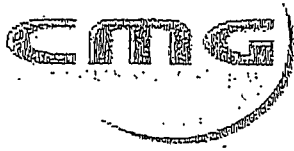
I release CMG and other persons or entities from any claims that might be based on CMG's decision to conduct a background check.

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 *Aneva Johnson* Date: 02/12/2018





## Preliminary Questions

For CMG use only

Name: Dalinda Kheng

Date: 2/20/18

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 do you prefer? 2nd

**\*To be completed during or after interview\***

Date of interview 2/20/18

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

Explain

Incident \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

X Employee Signature Kheng Dalinda

Interviewer Signature [Signature]

