

SENSITIVE BUT UNCLASSIFIED

Department of Homeland Security
E-Verify

Report Prepared: 06/04/2012

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Case Verification Number: 2012156154031UJ

Case Information:**Employee Information:**

Last Name:	Oum	First Name:	Chhoeuth
Middle Initial:		Maiden Name:	
Social Security Number:	*** ** 5832	Date of Birth:	04/05/1971
Citizenship Status:	A citizen of the United States		

Document Information:

List B Document:	Driver's license or ID card issued by a U.S. state or outlying possession	List C Document:	Social Security Card
Document Name:	Driver's license	Document State:	Minnesota
Driver's License or ID Card Number:		Document Expiration Date:	04/05/2015
Alien Number:		I-94 Number:	

Additional Information:

Hire Date:	06/04/2012	Employer Case ID:	
Three-Day Rule Reason:		Three-Day Rule - Other:	
Submitted By:	LVAN1912	Submitted On:	06/04/2012

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:	Maiden Name:
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:	LVAN1912	Closed On:	06/04/2012

SENSITIVE BUT UNCLASSIFIED

MINNESOTA
DRIVER'S LICENSE



CHHOEUTH KLAUT OUM
2015 43RD ST NW
ROCHESTER, MN 55901

Date of Birth 04-05-1971
Sex Eyes Class
F BRN D
Height Weight
5-2 110

ISSUED 03-2011 EXPIRES 04-05-2015
Chhoeuth Klaut Oum

V032251687505

SOCIAL SECURITY

SOCIAL SECURITY
977-04-5832
THIS NUMBER HAS BEEN ESTABLISHED FOR
CHHOEUTH KLAUT OUM
Chhoeuth Klaut Oum
SIGNATURE



Preliminary Questions

Name: Chhoeuth Dum

Date: 6-4-12

1. If hired, can we run a national background study? yes
2. If hired are you willing to take a drug test? yes
3. Are you able to work with soy, wheat, peanuts & milk? yes
4. Are you able to work with pork? yes
5. Which plant do you prefer? southern (prefer)
6. What shift to you prefer? 2nd

-If called for an interview please bring two forms of identification.

(Social security card, birth certificate, passport and license or permanent resident card)



New Employee Acknowledgement Form

Welcome to CMG and Reichel Foods!

As a new employee, you will be provided with copies of documents or items listed below. Please initial each line when you receive that particular document or item. Please sign and date the bottom of the sheet when all documents or items have been distributed to you.

Time Off Request Procedure	<u>X</u>
Attendance Policy	<u>X</u>
CMG Benefits	<u>X</u>
No Smoking Policy	<u>X</u>
Receipt of Unemployment Acknowledgement	<u>X</u>
Health Insurance Policy	<u>X</u>
Drug and Alcohol Testing Policy	<u>X</u>
CMG/Reichel Foods Handbook	<u>X</u>
Safety Rules	<u>X</u>

I hereby acknowledge that I have been provided with each and every item listed above, that it is my responsibility to read and follow each document provided to me and that if I have any questions concerning the item or its content then it is my responsibility to address my questions with my supervisor or CMG, 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.

Dated: 6-04-12

Signature: Chhoenth Oum

(Printed Name) Chhoenth Oum



CMG APPLICATION FOR EMPLOYMENT

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

PLEASE COMPLETE PAGES 1-5 DATE 06-1-12

Name Oum Chhoeuth Klaut
Last First Middle Maiden

Present address 2015 43rd St NW
Number Street
Rochester MN 55901
City State Zip

Social Security No. 477-04-5832

Telephone (507) 254-1008 E-Mail _____

If under 18, please list age _____ Referred by _____

Position applied for (1) Production - open Shift available to work
 and salary desired (2) \$15.00
 (Be specific) 1st
2nd X 1pm - 9pm
3rd

How many hours can you work weekly? 40 hrs Can you work nights? _____

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

When available for work? open

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	<u>John Marshall</u>		<u>1987-1990</u>	<u>diploma</u>
College	<u>RCTC</u>		<u>1990-1991</u>	<u>generals N/A</u>
	<u>RCTC</u>		<u>2010-2011</u>	<u>CD N/A</u>
Bus. or Trade School				
Professional School				

HAVE YOU EVER BEEN CONVICTED OF A CRIME? No Yes

1/14

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

APPLICATION FOR EMPLOYMENT

DO YOU HAVE A DRIVER'S LICENSE? Yes No

What is your means of transportation to work? I am driving (car)

Driver's license number NO32281687505 State of issue MN

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 Chhom Ponn Name Jenna Chhem

Position Packing Position Operation Check

Company CMG Company CMG

Address _____ Address _____

Telephone (507) 202-4936 Telephone (507) 316-3350

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>Chhoeuth Oum</u>		Supervisor name <u>Kim Hansen</u>	
Position <u>Assistant dir / program Assistant</u>		Employment dates	Pay or salary
Company <u>Child Care Resource & Referral</u>			
Address <u>126 Woodlake Drive SE</u>		From <u>Aug 1995</u>	Start <u>\$6.25</u>
<u>Rochester, MN 55904</u>		To <u>June 2011</u>	Final <u>\$11.33</u>
Telephone <u>(507) 287-2020</u>		Your last job title <u>Program Assistant (Head Start center)</u>	
Reason for leaving (be specific) <u>get layoff, no recall</u>			
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 _____			
Address _____		From _____	Start _____
Telephone (____) _____		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.			

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 _____ 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) _____		
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  Date: 6-1-12

Chhoeuth Oum

Objective

To find employment within a company where I can use my knowledge and skills. I also have a long time experience in the child care field, but I am willing to learn new and different experiences.

Experience

Aug. 1995 to Jun. 2011 **Child Care Resource and Referral Inc.** Rochester, MN

Program Assistant/Teacher Aide (Head Start Center)

- Facilitate classroom learning activities in large and small groups.
- Helped children during self-care activities such as brushing teeth, preparation for activities, hand-washing etc.
- Assisted in food preparation of meals and snacks. Also kitchen cleanup that was required.
- Helped provide guidance to children in social interactions and educational instructions.
- Assisted in cleaning site area used by staff and children.
- Helped support staff during absences and time of need.
- Participated in required drills and activities on site.
- Help assist staff in required activities to meet the Head Start Performance Standard and Rule 3 Licensing.
- Participated as an active team member during staff meetings, site meetings, professional development opportunities, educational and social experiences of Head Start families and children.
- Performed all job responsibilities, respecting confidentiality and privacy of families.

Achievements:

- ❖ 10 years of Service Award in 2005
- ❖ Certification of Appreciation and Dedication to Head Start

Education

1987-1990	John Marshall High School (Diploma)	Rochester, MN
1990- 1991	Rochester Community and Technical College (N/A)	Rochester, MN
2010- 2011	Rochester Community and Technical College (N/A)	Rochester, MN

REFERENCES:

References are available upon request.