

10/20 Mon @ 12pm

**ENTERED
EQUIP**



CMG APPLICATION FOR EMPLOYMENT

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

PLEASE COMPLETE PAGES 1-5 DATE 09/05/2014

Name ELIZABETH MEMBA OGWANGI
Last First Middle Maiden

Present address 4920 16th AVE NW
Number Street
ROCHESTER NW 55901
City State Zip

Social Security No. 475 - 55 - 2781

Telephone 507 263 272 6636 *not working* E-Mail danielogwangi@yahoo.com

If under 18, please list age _____ Referred by LEAVE ONTWELA

Position applied for (1) LINE (HUMAN NORTH) Shift available to work
 and salary desired (2) _____
 (Be specific) 1st (M) 1st _____
 2nd _____
 3rd _____ *works Sunday only RS 10/20*

How many hours can you work weekly? 40 Can you work nights? NO

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

When available for work? Immediately

Do you have responsibilities or commitments that will prevent you from meeting specified work schedules?
 ___ No Yes If so, please explain I DON'T WORK SATURDAYS

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				
<u>Primary School</u>			<u>7</u>	

APPLICATION FOR EMPLOYMENT

DO YOU HAVE A DRIVER'S LICENSE? ___ Yes No

What is your means of transportation to work? HUSBAND GIVES RIDE

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? _____

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 LSARE ONTWILD Name JIMMY DMBUI

Position WAREHOUSE ↳ go to church Position P.C.A.

Company HOT REPAIR FROM Company MAYO CLINIC

Address _____ Address _____

Telephone (507) 358 3268 Telephone (507) 322 8078

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 ELIZABETH OGWAOKA <u>ALLIANCE HEALTH</u>		Supervisor name <u>ROBIN NYANJONIA</u>	
Position <u>PCA</u>		Employment dates	Pay or salary
Company <u>ALLIANCE HEALTH</u>		From <u>07/2011</u>	Start <u>9.70</u>
Address <u>MINNEAPOLIS</u>		To <u>08/2014</u>	Final <u>9.70</u>
Telephone <u>(763) 442 7139</u>		Your last job title <u>PCA</u>	

Reason for leaving (be specific) BE NEAR MY SPOUSE HERE

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company.

Care for disabled children, and those with autism. ↳ vacuum, feeding, dressing, cooking for baby

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

Be

Date:

09/05/2014

SENSITIVE BUT UNCLASSIFIED

Department of Homeland Security
E-Verify

Report Prepared: 10/20/2014
Page: 1 of 1

Case Verification Number: 2014293132811VZ

Case Information:**Employee Information:**

Last Name:	Ogwangi	First Name:	Elizabeth
Middle Initial:		Other Names Used:	
Social Security Number:	*** ** 2781	Date of Birth:	03/28/1956
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:	LIN1190936815	Document Expiration Date:	
Alien Number:	061165040	I-94 Number:	

Additional Information:

Hire Date:	10/20/2014	Employer Case ID:	
Three-Day Rule Reason:		Three-Day Rule - Other:	
Submitted By:	ESAG6409	Submitted On:	10/20/2014

Initial Case Result:

Last Name (in DHS records):	OGWANGI	First Name (in DHS records):	ELIZABETH
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Document Expiration Date (in DHS records):	INDEFINITE
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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:

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:

10/20/2014

SENSITIVE BUT UNCLASSIFIED

Name: Elizabeth Ogwangi

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-ooht-hite." It is the German word that wishes someone good health after sneezing.

Name: _____

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



Preliminary Questions

For CMG use only

Name: Elizabeth Ogwang'i

Date: 10/20/14

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? Yes
3. Are you able to work with pork? Yes
4. Which plant do you prefer? North
5. What shift do you prefer? 1st

To be completed during interview only

Date of interview 10/20/14

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

Explain

Incident _____

→ Employee Signature Be

Interviewer Signature Kulay Adhwal



Applicant Interview Score Card

Name Elizabeth Date of Interview 10/20/14

Position/Shift Assignment 1(n) 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 46

Former Employer Rating Bonus Points 1-20 -

Interviewer: Kelsey

Total Points 46

Date: 10/20/14