

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

**CMG APPLICATION FOR EMPLOYMENT**



PLEASE COMPLETE PAGES 1-5  
DATE 03-03-2015

Name: Ismail Hussein Abd  
Last First Middle Maiden

Present address: 1510 6th ave S Apt: 6  
Number Street City State Zip  
St. Cloud Mn 56301

Social Security No. 760-31-6804

Telephone (320) 296 0107

If under 18, please list age: NO

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

Position applied for (1): Packaging  
and salary desired (2): 12.00  
(Be specific)

Shift available to work:  
1st  2nd  3rd

How many hours can you work weekly? 12 hours  
Can you work nights? YES I work

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

When available for work? 03-03-2015

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	Grade 10	15607 S.E. 5th	Solo to sell	Chemistry
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?

Driver's license number M673129382416 State of issue MN

Operator  Commercial (CDL)  Chauffeur

Expiration date 01-01-2017

Have you had any accidents during the past three years?  Yes  No  
If so, how many? 1 time

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 Ahmed Hour Ismail Name Mohamed Omer

Position Training Position outgoing Sto mack

Company Colamen Company Steno Turkey

Address 1510 6th ave S. Apt 110 Address 1510 6th ave S. Apt 154

St. Cloud mn 56301 St. Cloud mn 56301

Telephone (612) 226 0892 Telephone (320) 237 1053

APPLICATION FOR EMPLOYMENT

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

fishing work

Reason for leaving (be specific) it's done

Your last job title <u>Packing</u>		Telephone (job) <u>8827222</u>
From <u>7/7/2014</u>	To <u>7/7/2014</u>	Address <u>Seattle WA 98199</u>
Employment dates	Pay or salary <u>7</u>	Company <u>Iccicle Sea food</u>
Supervisor name <u>Atturn</u>		Position <u>Iccicle Seafoods</u>
		Name <u>Iccicle Seafoods</u>

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

Food: Tamar

Reason for leaving (be specific) I am moving to St. Cloud

Your last job title <u>Line</u>		Telephone (job) <u>329 231 7198</u>
From <u>10-25-2012</u>	To <u>4-21-2013</u>	Address <u>1235 30th St SW Willmar</u>
Employment dates	Pay or salary <u>6.45</u>	Company <u>Semco Turkey</u>
Supervisor name <u>Nick</u>		Position <u>Line</u>
		Name <u>Semco Turkey</u>

**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.

**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 \_\_\_\_\_

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 <u>Masterseon</u>		Supervisor name _____	
Position <u>Helpin o peroter</u>		Employment dates _____	
Company <u>Atlan Printing</u>		Pay or salary _____	
Address <u>3005AURW DR</u>		From <u>11-00-2013</u>	
Telephone <u>(329) 251 9611</u>		To <u>2-14-2014</u>	
Reason for leaving (be specific) <u>It's slow job</u>		Start <u>9.60</u>	
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company.		Final <u>9.60</u>	
Your last job title <u>Helpin o peroter</u>			

Name _____		Supervisor name _____	
Position _____		Employment dates _____	
Company _____		Pay or salary _____	
Address _____		From _____	
Telephone ( ) _____		To _____	
Reason for leaving (be specific) _____		Start _____	
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.		Final _____	
Your last job title _____			

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: 03-04-2015