

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School	Overland High School	Overland, CO	12	High School Diploma
College				
Bus. or Trade School				
Professional School				

**PLEASE COMPLETE PAGES 1-5**

Name: Abdulkarim Omar Tahre

Present address: 123 33 Ave W Apt 1  
Number Street Cloud MN 56303  
City State ZIP

Social Security No. 174-43-3410

Telephone 612-407-2244

E-Mail Somali.ahmed@no.fmg.

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

Position applied for (1) Production

and salary desired (2) \$10.00  
(Be specific)

Shift available to work: 1st  2nd  3rd

How many hours can you work weekly? 40 hrs

Can you work nights? NO

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

When available for work? RIGHT NOW

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 \_\_\_\_\_

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

**CMG APPLICATION FOR EMPLOYMENT**



APPLICATION FOR EMPLOYMENT

Telephone (651) 878-4680  
 Telephone (320) 330-3373

Address Tenesse  
 Address Saint cloud, MN

Company Truck Drivers  
 Company Electro (SHE)

Position Drivers  
 Position Production

Name Mohammad Amin  
 Name Richard Kawaszi

Please list two references other than relatives or previous employers.

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? 3

Expiration date 01-01-2018

Operator Commercial (CDL)  Chauffeur

Driver's license number 34721821 State of issue TX

What is your means of transportation to work?  
 I have my own car to come to work

DO YOU HAVE A DRIVER'S LICENSE? Yes  No

APPLICATION FOR EMPLOYMENT

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

Reason for leaving (be specific)

Your last job title		Telephone ( )
To	From	
Final	Start	Address
Pay or salary	Employment dates	Company
Supervisor name		Position
		Name

I worked on the production line for 2 years then moved on to driving the forklift on the production line. I'm a certified forklift driver.

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

Reason for leaving (be specific) *Ended*

Your last job title <i>Forklift Driver</i>		Telephone ( )
To	From	
Final \$15.00	Start \$13.00	Address <i>Texas</i>
Pay or salary	Employment dates	Company <i>M&amp;A Production</i>
Supervisor name <i>Harper, Carl</i>		Position <i>Forklift Driver</i>
		Name <i>CS</i>

**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 _____		Supervisor name _____	
Position _____		Employment dates _____	
Company _____		Pay or salary _____	
Address _____		From _____	
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.			

Name _____		Supervisor name _____	
Position _____		Employment dates _____	
Company _____		Pay or salary _____	
Address _____		From _____	
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.			

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.

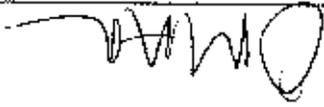
I understand that a comprehensive background check may be conducted to determine my eligibility for hire by CMG. This may include but is not limited to, investigations of criminal and/or conviction records, driving records and/or a drug screen test as required by clients, government regulators or by 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:

03-30-2015