

11:00 6/2 - Oct.

Starts @ 4pm other bb



Please return to 245 Industrial Blvd Sauk Rapids Any Questions Call 320.281.5617

CMG APPLICATION FOR EMPLOYMENT

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

PLEASE COMPLETE PAGES 1-5

DATE 5/27/16

Name MEDHO G. AGADA
Last First Middle Maiden

Present address 1003 8th Ave South Apt #301
Number Street
St. Cloud MN 56301
City State Zip

Social Security No. 471 -35 -4851

Telephone (320) 309 1050

E-Mail methuakwai@gmail.com

If under 18, please list age 32

Referred by John Bakou

Position applied for (1) any
and salary desired (2) _____
(Be specific)

Shift available to work

1st 1
2nd 3
3rd 2

How many hours can you work weekly? _____ Can you work nights? yes

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

When available for work? ASAP Needs to leave @ 3pm

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>Edison High</u>	<u>Mpls</u>	<u>Graduated</u>	<u>General</u>
College	<u>St. Cloud Community College</u>	<u>St. Cloud</u>	<u>attending</u>	
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? I have a ride

Driver's license number _____ State of issue _____

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? 2

Please list two references other than relatives or previous employers.

Name John Bakari Name Cham Agada

Position I don't know Position assembly Tech

Company cmg Company New Flyer

Address _____ Address 1215 14th AVE N Apt#207
St. Cloud MN 56303

Telephone (____) _____ Telephone (320) 496 5052

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>Medho Agada</u> Guede Foundries M.A.		Supervisor name <u>Randy</u>	
Position <u>Knock-Off</u>		Employment dates	Pay or salary
Company <u>Guede Foundries</u>		From <u>4/8/13</u>	Start <u>12.00</u>
Address <u>5200 Foundry Cir.</u>		To <u>3/11/16</u>	Final <u>16.79</u>
Address <u>St. Cloud MN</u>		Your last job title <u>Knock off</u>	
Telephone <u>(320) 251 5200</u>			

Reason for leaving (be specific) I went to jail

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

Name <u>Medho Agada</u> IBCO Direct		Supervisor name <u>Jay</u>	
Position <u>Material Handler</u>		Employment dates	Pay or salary
Company <u>IBCO Direct</u>		From <u>12/4/09</u>	Start <u>9.00</u>
Address <u>1910 Heaven Rd.</u>		To <u>4/17/13</u>	Final <u>12.25</u>
Address <u>Little Falls MN</u>		Your last job title _____	
Telephone () _____			

Reason for leaving (be specific) I found a job in St. Cloud.

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 <u>Medino Agada</u>	Supervisor name <u>Brenda</u>	
Position <u>Team lead</u>	Employment dates	Pay or salary
Company <u>Electrolux</u>	From <u>7/8/07</u>	Start <u>12.00</u>
Address _____	To <u>9/17/09</u>	Final <u>15.56</u>
Telephone <u>(320) 251-1212</u>	Your last job title <u>Team lead</u>	

Reason for leaving (be specific) I took a week off for my son birth

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



Date: 5/27/16