



CMG APPLICATION FOR EMPLOYMENT

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

PLEASE COMPLETE PAGES 1-5		DATE <u>1-24-2015</u>
Name <u>Schloemer, Angelia M</u>		
<small>Last First Middle Maiden</small>		
Present address <u>948 Savanna Avenue</u>		
<small>Number Street</small>		
<u>Saint Cloud</u> <u>MN</u> <u>56303</u>		
<small>City State Zip</small>		
Social Security No. <u>468-92-4126</u>		
Telephone <u>320-360-4391</u>		E-Mail <u>Angelia.Schloemer.99@hotmail.com</u>
If under 18, please list age _____		Referred by _____
Position applied for (1) <u>Entry level</u>	Shift available to work	
and salary desired (2) <u>Open</u>	1 st <input checked="" type="checkbox"/>	
<small>(Be specific)</small>	2 nd <input checked="" type="checkbox"/>	
	3 rd <input checked="" type="checkbox"/>	
How many hours can you work weekly? <u>40+</u>		Can you work nights? <u>Yes</u>
Employment desired <input checked="" type="checkbox"/> FULL-TIME ONLY <input type="checkbox"/> PART-TIME ONLY <input checked="" type="checkbox"/> FULL- OR PART-TIME		
When available for work? <u>ASAP</u>		
Do <input checked="" type="checkbox"/> you have responsibilities or commitments that will prevent you from meeting specified work schedules?		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If so, please explain _____		
Do <input checked="" type="checkbox"/> you anticipate any absences from work on a regular basis?		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If so, please explain _____		

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School	<u>Apollo High School</u>	<u>1000 44th Ave. North</u>	<u>12</u>	<u>General</u>
College	<u>Saint Cloud Technical College</u>		<u>3</u>	<u>Dental Assisting (graduated)</u>
Bus. or Trade School				<u>paralegal (1 year completed)</u>
Professional School				

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

What is your means of transportation to work? Self, My Car

Driver's license number 281623214015 State of issue MN

Operator Commercial (CDL) ___ Chauffeur ___

Expiration date 11-06-2017

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 Kris Moeller

Name Jennifer Bradwisch

Position Dental Assistant

Position Homemaker/Per. Student

Company HealthPartners

Company _____

Address 20747 Woodbine Rd

Address 273 Balsam Drive

Cleanwater, MN 55320 Foley MN 56329

Telephone 320.260-7645

Telephone 320.420-5084

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>Angelia M. Schloemer</u>		Supervisor name _____	
Position <u>Sales floor</u>		Employment dates	
Company <u>Target</u>		From <u>11-2013</u>	Pay or salary
Address <u>Target Crossroads</u>		To <u>05-2014</u>	Start <u>7.75</u>
Telephone <u>(507) 654-0799</u>			Final <u>7.81</u>
		Your last job title <u>Sales/Cashier</u>	

Reason for leaving (be specific) Worked here while full time in school for Paralegal. Quit after school to work full time.

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. I was hired on for just seasonal (christmas) but was offered permanent position and worked until school was done.

Name <u>Staffing Agencies</u>		Supervisor name <u>Atlas, Prastaff, Deberety</u>	
Position <u>Various</u>		Employment dates	
Company <u>Arctic Cat, Coborn's</u>		From	Pay or salary
Address <u>Balony, Global Edge</u>		To	Start <u>9.00-</u>
Telephone <u>(Blue Star)</u>			Final <u>12.00</u>
		Your last job title _____	

Reason for leaving (be specific) Seasonal Temp. jobs

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. Assembled engines on assembly line at Arctic Cat this summer while they ran snowmobile line. Entered and researched fraud using Xcell system. Cleared fire damaged homes. Packing and boxing.

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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>Angela Schloemer</u>		Supervisor name <u>Diane Gorder</u>	
Position <u>Dental Assistant / Receptionist</u>		Employment dates	Pay or salary
Company <u>HealthPartners Dental</u>		From <u>1999</u>	Start <u>10.00</u>
Address <u>1245 15th St NW St Cloud</u>		To <u>2011</u>	Final <u>18.73</u>
Telephone <u>800.253.5824</u>		Your last job title _____	

(moved)

Reason for leaving (be specific) DWI accident against company policy

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.
Front desk duties. Assisted Dentist.
Took X-rays, made temp crowns. Placed Sealants. Attended to sterilization of instruments.

Name <u>Angela Schloemer</u>		Supervisor name <u>Jeff Mathiesen</u>	
Position <u>Server, hostess, Cashier</u>		Employment dates	Pay or salary
Company <u>Bonanza</u>		From <u>1994</u>	Start <u>> min wage</u>
Address <u>3440 Division St. Saint Cloud MN 56303</u>		To <u>1999</u>	Final _____
Telephone <u>(320) 253-5872</u>		Your last job title _____	

prep cook

Reason for leaving (be specific) Finished dental assisting school and got job at healthpartners

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.
Prepped food, Served food, Cashier and took orders.

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

Angela Schloemer

Date:

1-29-2015