

CORPORATE MANAGEMENT GROUP

Employment Application

Office Hours: 9am-4pm Mon-Thur, 9am-3pm Fri

Office Number: 507-923-4955

Office Address: 3707 Commercial Dr. SW Rochester, MN 55902



Applicant Information

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

Please fully complete pages 1-3

Full Name: (Last Name, First Name) Chen, Brooke Date: 02/03/2022

Address: (Street Address) 957 Pendant Ln NW (Apt. /Unit #) 101

(City) Rochester (State) MN (ZIP Code) 55901

Phone: (734) 450-7319 Email: bchen93@gmail.com

Social Security No. 382-15-9128 Date Available: Immediately

Position Applied for: _____ Desired Salary: \$15.00/hr

Shift Available to work: 1st ☒ 2nd ☐ 3rd Employment desired: ☒ Full-Time ☐ Part-Time

Are you authorized to work in the U.S? ☒ Yes ☐ No

How did you hear about us? Indeed.com Referral Name: _____

If under 18, please list age: _____

Do you have responsibilities or commitments that will prevent you from meeting specified work schedules? ☒ No ☐ Yes

Education				
Type of School	Name of School	Location (Complete Mailing Address)	Number of Years Completed	Major & Degree
High School	Sturgis High School	2600 Vinewood Ave Sturgis, MI 49091	4	HS Diploma
College	Florida State College at Jacksonville	101 W State St Jacksonville, FL 32202	2	Associate's in Arts
Bus. Or Trade School				
Professional School				

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Previous Employment

Company: US Navy Reserve Phone: N/A

Address: N/A Supervisor: N/A

Job Title: IT Starting Salary: \$ E1 Ending Salary: \$ E5

Responsibilities: Troubleshooting computer systems and communication systems

From: 10/11 To: 10/19 Reason for Leaving: End of contract

May we contact your previous supervisor for reference? ☐ Yes ☒ No

Company: PetSmart Phone: (904) 579-2362

Address: 1919 Wells Rd Orange Park, FL 32073 Supervisor: Anna Jones

Job Title: Pet Care Associate Starting Salary: \$ 9.50 Ending Salary: \$ 9.50

Responsibilities: Care for pets, perform customer service, cashiering

From: 05/2017 To: 01/2018 Reason for Leaving: Increased course workload at school

May we contact your previous supervisor for reference? ☒ Yes ☐ No

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for reference? ☐ Yes ☐ No

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for reference? ☐ Yes ☐ No

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: [Signature] Date: 02/03/2022

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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

A handwritten signature in dark ink, appearing to be 'M. H. C.', is written over a horizontal line.

Date: 02/03/2022

Florida

DRIVER LICENSE



CLASS E

C000-061-93-664-0

1 CHOU
2 BROOKE ADRIENNE
3 4083 SUNBEAM RD APT 1606
4 JACKSONVILLE FL 32257-7518

5 DOB: 05/04/1993 6 SEX: F 7 VETERAN
8 EXP: 05/04/2026 9 HGT: 5'-02"

12 REST: A 13 END: NONE

14 DONOR

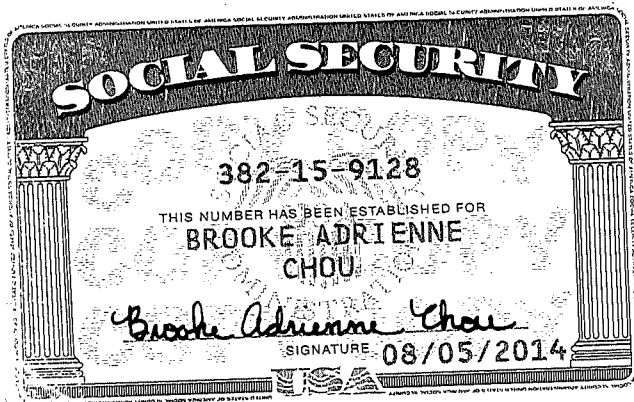
SAFE DRIVER
15 ISS: 03/26/2018

16 DDD: X631910172429

17 REPLACED: 10/17/2019

Operation of a motor vehicle constitutes
consent to any sobriety test required by law.





Brooke Chou

Rochester, MN 55901

M: 734-450-7319

E: bchou93@gmail.com

Objective

Highly motivated and detail-oriented student seeking an office or retail position while attending school. Friendly, welcoming personality with experience in the customer service industry. Capable of multi-tasking and thriving in a fast-paced environment.

Technical Skills

- | | | |
|-----------------------|---|------------------------|
| • Customer Service | • MS Office | • BOPIS Orders |
| • Register Experience | • Conflict Resolution | • Item Pricing |
| • Inventory | • Stocking | • Price-Matching |
| • Types 77 WPM | • Computer User Profile Management/Access | • Administrative Tasks |

Education

UNIVERSITY OF NORTH FLORIDA

Jacksonville, FL

Bachelor of Science Degree in Behavioral Neuroscience

May 2022

(Graduation expected in May 2022)

FLORIDA STATE COLLEGE AT JACKSONVILLE

Jacksonville, FL

Associate of Arts Degree

May 2018

Related Experience

PetSmart

Orange Park, FL

Pet Care Associate

2017-2018

- Provided food, water, and enrichment for animals on the sales floor, in the sick room and the new arrivals room
- Checked animals on the sales floor for injury or signs of illness
- Transferred sick animals to the quiet room and administered medications as prescribed by a veterinarian
- Maintained animal habitat cleanliness
- Assisted in addressing pet owners' animal care concerns and advised them through the pet purchasing process
- Provided excellent customer service
- Handled BOPIS orders
- Stocked, priced, and handled product inventory

PetSmart

Muskegon, MI

Pet Care Associate/Bather

2013-2014

- Provided food, water, and enrichment for animals on the sales floor, in the sick room and the new arrivals room
- Checked animals on the sales floor for injury or signs of illness
- Transferred sick animals to the quiet room and administered medications as prescribed by a veterinarian
- Maintained animal habitat cleanliness
- Assisted in addressing pet owners' animal care concerns and advised them through the pet purchasing process
- Provided excellent customer service
- Bathed and kennel-dried dogs in the store salon
- Trimmed dogs' and cats' nails

Other Work Experience

AMERICAN RED CROSS, Ann Arbor, MI, Hospital Lead Volunteer	2020-2022
FIRST COAST NO MORE HOMELESS PETS, Jacksonville, FL, Volunteer	2016-2020
U.S. NAVY RESERVE, Information Systems Technician	2011-2019
PETSMART, Pet Care Associate, Jacksonville, FL	2017-2018
INTERNATIONAL LANGUAGE SCHOOL, Kindergarten Teacher, Sasebo, Japan	2015-2016
INTERNATIONAL LANGUAGE SCHOOL, English Tutor, Sasebo, Japan	2015-2016



CMG/Reichel Foods, Inc. \$2,000.00 Retention Bonus

Thank you for accepting a position with CMG and Reichel Foods, Inc. By accepting this position, you are eligible for a \$2,000 Retention Bonus. Please read the below requirements and conditions about the sign-on bonus followed by your signature.

Requirements and Conditions for the \$2,000 Retention Bonus

- You must pass all Reichel Foods, Inc. hiring requirements before you are eligible for hire
 - o You must complete the CMG/Reichel Foods, Inc. orientation
 - o You must pass a drug screen and background check
 - o You must meet Reichel Foods, Inc. language requirements
 - o You must meet company policies and practices for attendance and performance
- If you resign or your assignment ends, you will forfeit any remaining portion of the Retention Bonus.
- The bonus amount is for \$2,000 total
 - o You will receive weekly payments of \$41.67 for 12 weeks (totaling \$500)
 - o After which, you will receive a \$500 check from CMG after each quarter worked (i.e. 13 weeks) for the following 3 quarters. This totals \$1,500.
- Payroll taxes (including State & Federal Income Taxes) will not be withheld from your \$500 checks that are provided by CMG. You will be responsible for the tax liability when you file your individual income tax returns.
- You will receive a 1099 for payments from CMG for any tax year you were paid the bonus.

**I acknowledge that I have read and understand the terms and conditions above regarding the \$2,000 Retention Bonus with CMG and Reichel Foods, Inc.*

Employee Name

Signature

Date

Brooke Chau [Signature] 02/03/2022

CMG Representative Name

CMG Representative Signature

Date

Kelly M. Suttie [Signature] 2.3.2022



New Employee Acknowledgement Form

Welcome to CMG and Reichel Foods!

As a new employee, you will be provided with the website, username and password to view the new hire forms that you signed during your CMG interview. Please sign and date the bottom of the sheet stating that you received your login information.

CMG/ ESSG / Reichel Foods Handbook

Healthcare Notice of Exchange and Website for Enrollment

Safety Policy

Drug and Alcohol Testing Policy

View Paystubs

Website: <https://zenople.esgazure.com/login/cmg>

**** do not fill out the below login name and password, CMG will provide you with this information ****

Login Name: 734 450 7319

Login Password: Bc@9128

I hereby acknowledge that I have been provided with the login information to view the items listed above. I understand that it is my responsibility to read and follow each document provided to me and that if I have any questions concerning the times or its content, that it is my responsibility to address my questions with my supervisor or CMG representative, and hereby waive any claim, now or in the future, that I did not receive, did not read or did not comprehend the items or their contents.

Signature:  **Date:** 02/03/2022

CMG Preliminary Questions



Name: Brooke Chou

Date: 02/03/2022

Please Mark Yes or No

1. If hired are you willing to take a drug test? ☒ Yes ☐ No
2. Do you have any known food allergies to soy, wheat, peanuts, or milk? Yes ☐ ☒ No
3. Are you able to work with pork? ☒ Yes ☐ No

Please Mark Your Preferred Position

4. Which plant do you prefer? ☒ South ☐ North
5. What shift to you prefer? ☐ 1st ☒ 2nd ☐ 3rd

To be completed during or after interview

Have you ever been convicted of a crime? Yes ☐ No ☒

Explain

Incident _____

Employee Signature *Brooke Chou*

Interviewer Signature *King*

Applicant Certification and Authorization for Background Check

Please read the below statements and initial on the indicated line

(This information will be inputted onto the online NHO form – you will be provided the login information during your interview)

I authorize Employer Solutions Staffing Group (ESSG) to use the information and statements contained in this application to determine my qualifications. I authorize ESSG to make inquiries of my former employers, except as indicated in this application, regarding my previous duties, responsibilities, performance, compensation and eligibility for rehire.

I understand that comprehensive background checks may be conducted to determine my eligibility for my hire by certain clients of ESSG. 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 ESSG policies.

I release ESSG and other persons or entities from any claims that might be based on ESSG's decision to conduct a background check. I certify that all statements made in my application are true and accurate and that I have not omitted any material information or provided false or misleading information. I understand that any material omission or misrepresentation will result in my disqualification from consideration for employment or if discovered after I begin my employment, will result in my termination.

If hired, I agree to abide by the policies and procedures of ESSG.

I have read and agree ABL (initial)

I hereby authorize Employer Solutions Staffing Group, LLC and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment purposes. I understand that the scope of the consumer report / investigative consumer report may include, but is not limited to the following areas: verification of social security number, credit reports, current and previous residences, employment history, education background, character references, drug testing, civil and criminal history records from any criminal justice agency in any or all federal, state, country jurisdictions, driving records, birth records, and any other public records.

I further authorize any individual, company, firm, corporation or public agency to divulge any and all information, verbal or written, pertaining to me, to Employer Solutions Staffing Group, LLC or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation or public agency may have to include information or data received from other sources Employer Solutions Staffing Group, LLC and its designated agents and representatives shall maintain all information received from this authorization in a confidential manner in order to protect the applicants personal information, including, but not limited to, addresses, social security numbers and dates of birth.

I have read and agree ABL (initial)

Name: Brooke Chau

Date: 02/03/2022

Achoo!

****Read the story and answer the multiple-choice questions below ****

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

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 that 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 your 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

Authorization to Enter New Hire Information

By signing below, I authorize a member of Corporate Management Group – Rochester Office – to enter my new hire paperwork into the online Zenople (NHO) site. I understand that I will be provided access via login name and password to view the forms that they have completed on my behalf.

Employee Signature: UBL Date: 02/03/2022

Insurance Information

I understand that the CMG Staff defaults to decline insurance when entering my new hire paperwork unless specified otherwise during my interview.

I understand that I have 30 days after my employment starts to apply for insurance through ESSG via the login information provided to me.

I agree: UBL (initial)

Electronic W-2 Consent:

The IRS has approved employers to send W-2 electronically to employees. Employees who choose to receive their W-2 statements electronically will have the following advantages. Faster access to your W-2. Ongoing availability to view the W-2. Ability to reprint as many times as needed.

Would you like to receive your W-2 statement electronically?

Yes ☒ No ☐

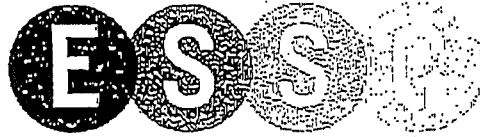
By completing the box below, you are consenting to receive your W-2 by email to only the email address that you list. A paper copy will **not** be provided. This option can be changed at any time but remains in effect until you inform ESSG that you would like to revoke your consent.

I consent to receive my W-2 by email at the address listed below from this date forward.

Email

bchou93@gmail.com

I agree: UBL (initial)



employer solutions staffing group.

Notification of Minnesota Law Requirement – Unemployment Acknowledgement

According to Minnesota Statute section 268.095, subdivision 2, paragraph (d), an applicant who; within five calendar days after completion of a suitable job assignment from a staffing service, (1) fails without good cause to affirmatively request an additional suitable job assignment, (2) refuses without good cause an additional suitable job assignment offered, or (3) accepts employment with the client of the staffing service, is considered to have quit employment. This paragraph applies only if, at the time of beginning of employment with the staffing service, the applicant signed and was provided a copy of a separate document written in clear and concise language that informed the applicant of this paragraph and that unemployment benefits may be affected.

It is your responsibility to contact ESSG through the recruiter stated below for additional assignments. If you fail to do so, it may affect your unemployment benefits.

I understand by signing this form that I am responsible to contact ESSG through the recruiter stated below within 5 calendar days once an assignment ends. I also acknowledge that I have been provided a copy of this form. SM (Initial)

Recruiter: Corporate Management Group

Phone Number: 303-9201425

Address: 1501 W. 124th Ave Unit 500 Westminster, CO 80234

Chileli

Employee Signature:

02/03/2022

Date:

Brooke Chow

Employee (please print your name here)

Voluntary Covid -19 Vaccination Status Certification

I understand that providing information regarding my vaccination status is currently voluntary. However, I also acknowledge that failure to provide this information may have an effect on my ability to be placed on specific assignments, should the employing company have a vaccination policy.

Are you Vaccinated against Covid-19?

If Yes-

Are you Fully Vaccinated or Partially Vaccinated?

- ☒ Fully Vaccinated
- ☐ Partially Vaccinated

If No-

If you are exercising your right not to receive the vaccination: Are you willing to submit to regular COVID-19 testing?

- ☐ Yes
- ☐ No

I hereby voluntarily release my vaccination status to ESSG and their agent.

- ☐ I read and agree