



Entered 01/06/15  
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## CMG APPLICATION FOR EMPLOYMENT

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

PLEASE COMPLETE PAGES 1-5 DATE 1/6/15

Name Villette Joseph B. Benjamin  
Last First Middle Maiden

Present address 2542 Stearns way  
Number Street  
SF Cloud MN 56303  
City State Zip

Social Security No. 472 - 02 - 7240

Telephone 625.606 - 7151 E-Mail Bj.Villette@ac.com

If under 18, please list age \_\_\_\_\_ Referred by Willie Klouk

Position applied for (1) <u>1st shift</u> and salary desired (2) <u>open</u> <small>(Be specific)</small>	Shift available to work 1 <sup>st</sup> <u>1st</u> <input checked="" type="checkbox"/> 2 <sup>nd</sup> <u>2nd</u> 3 <sup>rd</sup> _____
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How many hours can you work weekly? 40 Can you work nights? possibly

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

When available for work? 1/6/15

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	Apollo Sr High	SF. Cloud, MN	3 1/2 yrs	GED
College	SCJCC	SF. Cloud, MN	1 1/2 yrs	None
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? my car

Driver's license number D09137383 State of issue \_\_\_\_\_

Operator  Commercial (CDL) \_\_\_ Chauffeur \_\_\_

Expiration date 10/29/2046

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 Willie Kleak Name Scott Hutchinson

Position Husker Meats Position RA Lead

Company Husker Meats Company Passages, St. Cloud, Hospital.

Address St. Cloud, MN Address 121 party Ave South St. Cloud, MN

Telephone (320) 241-6862 Telephone (320) 282-9079

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>Passages</u>	Supervisor name <u>Darius (Jake) Jacobson</u>	
Position <u>Secretary / Admissions Asst.</u>	Employment dates	Pay or salary
Company <u>St. Cloud Hospital</u>	From <u>Aug 1, 09</u>	Start <u>1000 950</u>
Address <u>121 park ave S</u>	To <u>April 15, 09</u>	Final <u>1000 1252</u>
<u>St. Cloud, MN 56301</u>	Your last job title <u>Secretary Admissions Asst.</u>	
Telephone <u>(320) 259-5692</u>		

Reason for leaving (be specific) New line of work.

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. went from RA to Secretary. Filing of paper work. DNVCs. Admissions of clients coming in and out. (Insurance Billing, claims. Assisting of supervisor. Day to day operation. credit card purchases. ordering of office supplies.

Name <u>Mc Dowell Co.</u>	Supervisor name <u>Matt McDowell</u>	
Position <u>Apprentice sheet metal</u>	Employment dates	Pay or salary
Company <u>Mc Dowell Co.</u>	From <u>Jan. 1 07</u>	Start <u>700</u>
Address <u>1431 prosper dr.</u>	To <u>Jan 1, 08</u>	Final <u>1000</u>
Telephone <u>(320) 251-8640</u>	Your last job title <u>Apprentice.</u>	

Reason for leaving (be specific) Laid off.

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. Running Forklifts, Fabricating metals. work in groups and alone. Working in all weather conditions.

## 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 _____ Position _____ Company _____ Address _____ Telephone (____) _____	Supervisor name _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Employment dates</td> <td style="width: 50%;">Pay or salary</td> </tr> <tr> <td>From</td> <td>Start</td> </tr> <tr> <td>To</td> <td>Final</td> </tr> </table> Your last job title _____	Employment dates	Pay or salary	From	Start	To	Final
Employment dates	Pay or salary						
From	Start						
To	Final						

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 _____ Position _____ Company _____ Address _____ Telephone (____) _____	Supervisor name _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Employment dates</td> <td style="width: 50%;">Pay or salary</td> </tr> <tr> <td>From</td> <td>Start</td> </tr> <tr> <td>To</td> <td>Final</td> </tr> </table> Your last job title _____	Employment dates	Pay or salary	From	Start	To	Final
Employment dates	Pay or salary						
From	Start						
To	Final						

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:

1/6/15