



FAXED

SENSITIVE BUT UNCLASSIFIED

Department of Homeland Security
E-Verify

Report Prepared: 01/15/2010
Page: 1 of 1

Case Verification Number: 2010015174141QS

Initial Verification:

Last Name:	Douk	First Name:	Bunthy
Middle Initial:		Maiden Name:	
Social Security Number:	021-66-1898	Date of Birth:	09/19/1985
Hire Date:	01/15/2010	Citizenship Status:	Citizen of the United States
Alien Number:		I-94 Number:	
Passport or Passport Card Number:	424815468	Visa Number:	
Document Type:	Unexpired U.S. Passport or Passport Card	Doc. Expiration Date:	
Initiated By:	ESAG6409	Initiated On:	01/15/2010

Initial Verification Results:

Initial Eligibility: EMPLOYMENT AUTHORIZED

SSA Referral:

Referral By: Referral Date:

Verification Response:

Eligibility: Response Date:

SSA Resubmittal:

Last Name:	First Name:
Middle Initial:	Maiden Name:
Social Security Number:	Date of Birth:
Initiated By:	Initiated On:

Resubmittal Verification Results:

Eligibility:

Additional Verification:

Comments:
Initiated By: Initiated On:

Verification Response:

Eligibility: Response Date:

DHS Referral:

Referral By: Referral Date:

DHS Referral Results:

Eligibility: Response Date:

Case Resolution:

Resolve Option:	Resolved Authorized	Resolved On:	01/15/2010
Resolved By:	ESAG6409		

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APPLICATION FOR EMPLOYMENT

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

PLEASE COMPLETE PAGES 1-5 DATE 12-16-09

Name Bunthy Douk
Last First Middle Maiden

Present address 1659 8 1/2 Ave SE Rochester MN 55904
Number Street City State Zip

How long 1 yr. Social Security No. 021 66 1898

Telephone 507 244-1081

If under 18, please list age _____

Position applied for (1) any shift that starts at in the morning Referred by Mom Sin (carpool)
 and salary desired (2) 1st shift Days/hours available to work
 (Be specific) 40-80 hrs No Pref Thur _____
 Mon _____ Fri _____
 Tue _____ Sat _____
 Wed _____ Sun _____

How many hours can you work weekly? 40-80 hrs Can you work nights? Yes

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

When available for work? Dec. 20, 2009

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>Century</u>	-	<u>4 yrs</u>	<u>Diploma</u>
College	<u>RCTL</u>	-	<u>2 yrs</u>	<u>Business</u>
Bus. or Trade School				
Professional School				

HAVE YOU EVER BEEN CONVICTED OF A CRIME? No Yes

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. _____



ENTERED

APPLICATION FOR EMPLOYMENT

MILITARY

HAVE YOU EVER BEEN IN THE ARMED FORCES? __ Yes No

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD? __ Yes No

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>Mayo Clinic</u>	Supervisor name <u>Fabio</u>	
Position <u>Food service/ Material Handler</u>	Employment dates	Pay or salary
Company _____	From <u>2001</u>	Start <u>1/9</u>
Address _____	To <u>2008</u>	Final <u>8/18</u>
Telephone (____) _____	Your last job title <u>Material Handler</u>	

Reason for leaving (be specific) Moved to Seattle

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.