



CMG APPLICATION FOR EMPLOYMENT

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

PLEASE COMPLETE PAGES 1-5 DATE 7/24/14

Name Hernandez Jon Carlos
Last First Middle Maiden

Present address 2646 15th Ave S
Number Street
Minneapolis MN 55407
City State Zip

Social Security No. 476 - 08 - 4099

Telephone (612) 310-9758 E-Mail _____

If under 18, please list age _____ Referred by _____

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

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

When available for work? ASAP

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>South high</u>	<u>3131 17th Ave</u>	<u>4 yrs</u>	<u>Diploma</u>
College				
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 OWN CAR

Driver's license number Z346216136013 State of issue MN

Operator Commercial (CDL) ___ Chauffeur ___

Expiration date 1-10-2016

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 Lorena Carrasco Name Sam

Position production Position Manager

Company Supermans Company ABM

Address _____ Address _____

Telephone (612) 722-6372 Telephone (612) 799-9328

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>ABM</u>	Supervisor name <u>Sami</u>	
Position <u>Supervisor</u>	Employment dates	Pay or salary
Company <u>ABM Cleaning</u>	From <u>5/2011</u>	Start <u>14.52</u>
Address _____	To <u>present</u>	Final <u>16.03</u>
Telephone <u>(612) 799-9328</u>	Your last job title <u>Supervisor</u>	
Reason for leaving (be specific) <u>Still working</u>		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. <u>In charge of 5 employees making sure they do their Restrooms and other duties assign by Manager.</u>		

Name <u>Deli Express</u>	Supervisor name <u>Frika Lopez</u>	
Position <u>line lead</u>	Employment dates	Pay or salary
Company _____	From <u>10/2010</u>	Start <u>8.00</u>
Address _____	To <u>8/2005</u>	Final <u>10.50</u>
Telephone <u>(952) 937-9440</u>	Your last job title <u>line lead</u>	
Reason for leaving (be specific) <u>lay off</u>		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. <u>In charge of 50 employees in the packoff Area Making sure all the regular & Temp employees know how to box Sandwiches on the box trays box and doing Metal boxes checks every hour and filling out paper work every 2 hours and turning to the Data Center.</u>		

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> <tr> <td colspan="2">Your last job title _____</td> </tr> </table>	Employment dates	Pay or salary	From	Start	To	Final	Your last job title _____	
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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

Jen. Hemmery

Date:

7/29/14