

**CORPORATE MANAGEMENT GROUP**



**Employment Application**

Office Hours: 9am-4pm Mon-Thur & 9am-3pm Fri  
Office Number: 320-281-5614 Office Cell: 320-250-4380  
Office Address: 245 Industrial Blvd, Sauk Rapids, MN 56379

**Applicant Information**

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

Full Name: Donovan Tomas Gilsson Date: 2-25-24

Address: (Street Address) 1425 E SAINT GERMAIN STR (Apt. /Unit #) N/A

(City) Saint Cloud (State) MN (ZIP Code) 56304

Phone: 320 330 3112 Email: AKURLEYR:4@Gmail.com

Are you authorized to work in the U.S?  Yes  No Language: English

Social Security No. 469-33-8495 Date Available: ASAP

Position Applied for: N/A Desired Wage: \$15.80

Shift Available to work:  1<sup>st</sup>  2<sup>nd</sup>  3<sup>rd</sup> Employment desired:  Full-Time  Part-Time

How did you hear about us? \_\_\_\_\_ Referral Name: \_\_\_\_\_

Do you have responsibilities or commitments that will prevent you from meeting specified work schedules?  No  Yes Saturday 12pm - 2pm CLASS. Otherwise Open Schedule

Military Training (List dates and training received) N/A

**Previous Employment**

**APPLICANTS MUST LIST 2 LATEST EMPLOYMENTS, STARTING WITH THE MOST RECENT.**

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for reference?  Yes  No

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for reference?  Yes  No