

WENS

Wed 7/31 1:00 - interview



CMG APPLICATION FOR EMPLOYMENT

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

PLEASE COMPLETE PAGES 1-5 DATE 7/29/13

Name ~~_____~~ Austin Erik Odin
Last First Middle Maiden

Present address 816 South Broadway
Number Street
Rochester MN 55902
City State Zip

Social Security No. 477 - 27 - 3855

Telephone (507) 481-4618 E-Mail e94awstin@gmail.com

If under 18, please list age _____ Referred by Josh-link program

Position applied for (1) Open Shift available to work
 and salary desired (2) any
 (Be specific) 1st 2nd 3rd

How many hours can you work weekly? 38-40 Can you work nights? Yes

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

When available for work? 8/1/13

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>Golden Hill</u>	<u>2226 3rd Ave</u>	<u>12</u>	<u>NA</u>
College	<u>ALL</u>	<u>SE. Rochester MN 55904</u>		
	<u>NA</u>			
Bus. or Trade School	<u>NA</u>			
Professional School	<u>NA</u>			

HAVE YOU EVER BEEN CONVICTED OF A CRIME? ___ No Yes

If yes, explain number of conviction(s), nature of offense(s), dates of conviction(s), sentence(s) imposed, and type(s) of rehabilitation.

Misdemeanor Trespassing, Convicted March 18 to March 19

APPLICATION FOR EMPLOYMENT

DO YOU HAVE A DRIVER'S LICENSE? Yes ___ No

What is your means of transportation to work? Bike

Driver's license number B822066041512 State of issue MN

Operator ___ Commercial (CDL) ___ Chauffeur ___

Expiration date 11-02-2013

Have you had any accidents during the past three years? Yes ___ No

If so, how many? One

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 William Winter Name Josh Hameister

Position _____ Position Case Worker

Company Byron Martial Arts Academy Company Link Program

Address _____ Address _____

Telephone (507) 259 3537 Telephone (507) 226 3811

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>Grand Meadow Public Schools</u>		Supervisor name <u>Pawl Basel</u>	
Position <u>Janitor</u>		Employment dates	Pay or salary
Company _____		From <u>Jun</u>	Start <u>8.25</u>
Address <u>701 4th Ave NW 9</u>		To <u>Aug</u>	Final <u>8.25</u>
<u>Grand meadow MN 55336</u>		Your last job title _____	
Telephone <u>(507) 7545310</u>			
Reason for leaving (be specific) <u>Seasonal</u>			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. <u>Basic Building Maintenance</u>			

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.			

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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 _____	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.

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.

May we contact your present employer? Yes No **NA**

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.

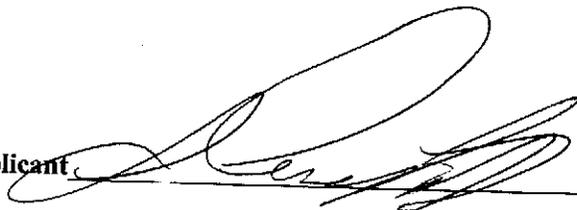
I understand that a comprehensive background check may be conducted to determine my eligibility for hire by CMG. This may include but is not limited to, investigations of criminal and/or conviction records, driving records and/or a drug screen test as required by clients, government regulations or by 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:

7/29/13

CMG

Preliminary Questions

Name: Eric Austin

Date: 7/31/2013

1. If hired, can we run a national background study? yes
2. If hired are you willing to take a drug test? yes
3. Are you able to work with soy, wheat, peanuts & milk? yes
4. Are you able to work with pork? yes
5. Which plant do you prefer? North / South
6. What shift do you prefer? 1st / 2nd

If called for an interview please bring two forms of identification.

(Social Security Card, Birth Certificate, passport and license or permanent resident card)