10:30 am

4-5-17

CMG
CORPORATE MANAGEMENT GROUP

ENTERED

CMG APPLICATION FOR EMPLOYMENT

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

PLEASE COMPLETE PAGES 1-5 DATE 03/24/17

Name Gelle, Eidle Bulale
Last First Middle Maiden

Present address 1111 41st Street NW APT: 112
Number Street

Rochester MN 55904
City State Zip

Social Security No. 843 - 01 - 8403

Telephone (813) 452 - 7615 E-Mail _____

If under 18, please list age _____ Referred by Anab Warsame

Position applied for (1) any open position
and salary desired (2) Open
(Be specific)

Shift available to work
1st _____
2nd ✓
3rd _____

How many hours can you work weekly? 40 hours Can you work nights? yes

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

When available for work? immediately

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	Muse Yusuf Secondary School	Afgoye Somalia	12	High school diploma
College				
Bus. or Trade School				
Professional School				

No English

APPLICATION FOR EMPLOYMENT

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

What is your means of transportation to work? I have someone to give me ride to work

Driver's license number _____ State of issue _____

Operator ___ Commercial (CDL) ___ Chauffeur ___

Expiration date _____

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 Anas Warsame

Position Assembly

Company CMG

Address _____

_____

Telephone (507) 202-4659

Name Abdifatah Abdi

Position Vascular Access Technician

Company Mayo Clinic

Address 402 31st St NE # 325

Rochester, MN 55906

Telephone (507) 202-9440

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 Tuke textile
Position Shop keeper
Company Tuke
Address Arsiye, Somalia
Telephone (252) 490 0857

Supervisor name Muse. awSalah

Employment dates	Pay or salary
From 01/2005	Start $500/month
To 11/2008	Final $800/month

Your last job title _____

Reason for leaving (be specific) Moved out to Ethiopia

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. Sell the Shop: book keeping, opening and closing the Shop.

Name _____
Position _____
Company _____
Address _____
Telephone (____) _____

Supervisor name _____

Employment dates	Pay or salary
From	Start
To	Final

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.

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 _____ Employment dates: From / To — Pay or salary: Start / Final 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 _____ Position _____ Company _____ Address _____ _____ Telephone (____)_____	Supervisor name _____ Employment dates: From / To — Pay or salary: Start / Final 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

Did you complete this application yourself ___ Yes ✓ No
If not, who did? Abdinassir

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: 03/24/17

Preliminary Questions

For CMG use only

Name: _____

Date: _____

1. If hired are you willing to take a drug test? _____
2. Do you have any known food allergies to soy, wheat, peanuts, or milk? _____
3. Are you able to work with pork? _____
4. Which plant do you prefer? _____
5. What shift to you prefer? _____

To be completed during or after interview

Date of interview_____

Have you ever been convicted of a crime? Yes____ No____

Explain

Incident_____

_____

_____

Employee Signature_____

Interviewer Signature_____