



1230P  
1/18  
ENTERED

## CMG APPLICATION FOR EMPLOYMENT

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

PLEASE COMPLETE PAGES 1-5 F. DATE Jan 18, 2017

Name Hailemaryam Haïmanot  
Last First Middle Maiden

Present address 28 8<sup>th</sup> Street NE  
Number Street  
Rochester NW 55906  
City State Zip

Social Security No. 859 - 49 - 8811

Telephone (651) 206-0092 E-Mail hhaile@yahoo.com

If under 18, please list age \_\_\_\_\_ Referred by AKlilu G/ Dengel

Position applied for (1) _____ and salary desired (2) <u>\$ 11.50 /hour</u> <small>(Be specific)</small>	Shift available to work 1 <sup>st</sup> <input checked="" type="checkbox"/> _____ 2 <sup>nd</sup> _____ 3 <sup>rd</sup> _____
--	--

How many hours can you work weekly? 40 hrs Can you work nights? \_\_\_\_\_

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

When available for work? As soon as possible

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>Medhaniyalem High School</u>	<u>Ethiopia</u>	<u>4</u>	<u>HSD</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? Ride and Bus

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 Teshome Wakene Name Tensaye Tadesse

Position Janitor Position Nursing Assistant

Company MAYO Company Comfort Health

Address 2908 Charles Ct Dr Address ✓

Rochester, MN - 55901 ✓

Telephone (651) 206-0092 Telephone (651) 347 7866

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>Herberger's</u>	Supervisor name <u>Dana njuw</u>	
Position <u>Support</u>	Employment dates	Pay or salary
Company _____	From <u>Dec 2016</u>	Start <u>10-50</u>
Address <u>Rochester, MN</u>	To <u>Present</u>	Final <u>10-50</u>
Telephone <u>(507) 535-1784</u>	Your last job title <u>Support team</u>	
Reason for leaving (be specific) <u>I'm still working as seasonal</u>		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company.		

Name <u>Sarem foods</u>	Supervisor name <u>Eyob Adugna</u>	
Position <u>packager</u>	Employment dates	Pay or salary
Company <u>food company</u>	From <u>2011</u>	Start
Address <u>Ethiopia</u>	To <u>2013</u>	Final
Telephone ( ) <u>251-913-45-95-45</u>	Your last job title <u>Package</u>	
Reason for leaving (be specific) <u>Relocated to the united States</u>		
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 _____	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

Did you complete this application yourself  Yes  No

If not, who did? \_\_\_\_\_

