

CORPORATE MANAGEMENT GROUP

Employment Application

Office Hours: 9am-4pm Mon-Thur, 9am-3pm Fri

Office Number: 507-923-4955

Office Address: 3707 Commercial Dr. SW Rochester, MN 55902



Applicant Information

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

Full Name: (Last Name, First Name) Magnis Hunter Date: 06/02/2012

Address: (Street Address) 1030 Elton Hills Dr NW (Apt./Unit #) _____

(City) Rochester (State) MN (ZIP Code) 55901

Phone: 205 237 1886 Email: hunter.magnis.10284@gmail.com

Social Security No. 419-57-9545 Date Available: 06-16-2012

Position Applied for: Food Production Desired Wage: 16

Shift Available to work: ☒ 1st ☐ 2nd ☐ 3rd Employment desired: ☒ Full-Time ☐ Part-Time

Are you authorized to work in the U.S.? ☒ Yes ☐ No

How did you hear about us? Indeed Referral Name: _____

If under 18, please list age: _____

Do you have responsibilities or commitments that will prevent you from meeting specified work schedules? ☒ No ☐ Yes

Previous Employment

Company: Robert + Ricant Phone: 205 237 7174

Address: 819 Ardour drive Supervisor: Tina

Job Title: Freight Handler

Responsibilities: handle freight Secure it and box it

From: 24 To: 25 Reason for Leaving: Close down

May we contact your previous supervisor for reference? ☐ Yes ☒ No

Company: Game Stop Phone: 615 931 9545

Address: 1013 Mayfield drive Supervisor: Marsh

Job Title: Senior Game Advisor

Responsibilities: open and close the store

From: 24 To: 25 Reason for Leaving: Move

May we contact your previous supervisor for reference? ☐ Yes ☒ No

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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 Hunter Harris Date: 06-02-20

Name: Itun-er Mathis

Date: 06-02-26

Rick and Rose

CMG Reading Test

**** Please read the story then answer the multiple-choice questions ****

Rick and Rose were good friends. They worked together at Reichel Foods.

One day they had a lot of work, and not enough employees, this same day the supervisor asked Rick to pack carrots and ranch in 100 boxes. Rick was worried he could not finish this before the day ended. He was going to ask Rose for help but he noticed she was gone. He knew if she didn't help, the boxes would not get packed on time.

The supervisor saw Rick working very hard and went to ask Rose for help. He looked for her in the cafeteria. When he saw her taking a break, he asked her why she wasn't helping Rick. "I didn't know that he needed help," said Rose, "I will go help him right away."

When Rick saw Rose coming to help, he felt happy and supported. "Please don't be afraid to ask me to help. We are good friends and co-workers," she said, "and together we make a great team."

1. Who are Rick and Rose?

- a. Co-workers
- ☒ b. Good friends
- c. Both A & B

2. Rick and Rose work at Reichel Foods. True or false? (circle one)

- ☒ a. True
- b. False

3. Where did the supervisor find Rose?

- a. Outside
- b. Working on the line
- ☒ c. In the cafeteria
- d. In the bathroom

4. How did Rick feel when he saw Rose?

- a. Mad
- b. Sad
- ☒ c. Happy
- d. Confused

5. What lesson did Rick and Rose learn?

- a. Teamwork
- b. How to make carrots and ranch
- c. Communication
- ☒ d. Both A & C

CMG Preliminary Questions



Name: Hunter Martin

Date: 06-02-20

Please Mark Yes or No

90 1. If hired are you willing to take a drug test? Yes No

20 2. Do you have any known food allergies to soy, wheat, peanuts, or milk? Yes No

90 3. Are you able to work with pork? Yes No

Please Mark Your Preferred Position

4. Which plant do you prefer? South North

5. What shift to you prefer? 1st 2nd 3rd

Have you ever been convicted of a crime? Yes ___ No ✓

Explain

Incident _____

Employee Signature _____

Interviewer Signature Liz

Complete after interview

Viewed the Production Video before interview Liz initials

Viewed New Hire Manual before interview Liz initials

Showed badge for punching in/out and with the call in line number
Liz initials



MINNESOTA

INSTRUCTION
PERMIT

NOT FOR FEDERAL IDENTIFICATION



1 MATHIS
2 HUNTER LOGAN XAVIER
8 1030 ELTON HILLS DR NW
ROCHESTER, MN 55901-8100

4d DL# V000-186-540-800

3 DOB 05/07/2004

9 CLASS IP

12 RESTR 2

4a ISS 12/09/2025

4b EXP 12/09/2027

9a END NONE

DONOR

15 SEX M

16 HGT 5'-11"

17 WGT 210 lb

18 EYES BRO

5 DD 000000012582965

05/07/04



Hunter Mathis

ALABAMA

Center for Health Statistics

ALABAMA CERTIFICATE OF LIVE BIRTH

0405-37103-
00377 (1)

County
File
Number

State File Number

101

04-019453

1. NAME First Middle Last (Type last name all capitals) Hunter Logan Xavier		2. DATE OF BIRTH (Month, Day, Year) MAY 7, 2004		3. TIME OF BIRTH (Specify am or pm) 12:18 PM	
4. SEX Male		5. THIS BIRTH (Specify Single, Twin, Triplet, etc.) Single		6. IF NOT SINGLE BIRTH (Specify if this child born first, second, etc.)	
8. CITY, TOWN OR LOCATION OF BIRTH Birmingham		7. COUNTY OF BIRTH Jefferson			
10. SIGNATURE OF ATTENDANT OR CERTIFIER <i>Leila L. Casey</i>		9. FACILITY NAME (If not institution, give street, street number, and indicate INSIDE or OUTSIDE city limits) Medical Center East		11. DATE SIGNED (Month, Day, Year) 05-10-04	
12. ATTENDANT'S NAME John Fischer		16. CERTIFIER'S NAME (If other than attendant) Leila L. Casey			
13. ATTENDANT'S ADDRESS Birmingham, AL		17. CERTIFIER'S ADDRESS Birmingham Alabama			
14. TYPE OF ATTENDANT M.D.		15. ATTENDANT'S LICENSE 9903		18. CERTIFIER'S TITLE Birth Certifier	
19. SIGNATURE OF EITHER PARENT- I certify that the personal information on this certificate is correct. <i>Robert E. Mathis</i>		20. DATE SIGNED (Month, Day, Year) 5-8-04		21. Parent(s) request that a Social Security Number be issued for this child Yes	
22. REGISTRAR'S SIGNATURE <i>Dorothy S. Hanchlaigan</i>		23. DATE FILED (Month, Day, Year) MAY 13 2004			
24. MOTHER'S MAIDEN LAST NAME George		25. MOTHER'S LEGAL NAME First Middle Last Tina Marie Mathis			
26. MOTHER'S DATE OF BIRTH October 31, 1974		27. MOTHER'S STATE OF BIRTH Alabama		28. MOTHER'S USUAL RESIDENCE-STATE Alabama	
29. MOTHER'S RESIDENCE-CITY Jefferson		30. MOTHER'S RESIDENCE-CITY OR TOWN AND ZIP CODE Pinson 35126		31. MOTHER'S RESIDENCE-STREET ADDRESS 5848 Shane Circle	
32. MOTHER'S RESIDENCE-Inside City Limits No		33. FATHER'S NAME First Middle Last Robert Earl Mathis		34. FATHER'S DATE OF BIRTH September 2, 1973	
35. FATHER'S STATE OF BIRTH (If Not U.S.A., name country) Alabama					

ALL ITEMS MUST BE COMPLETE AND ACCURATE



New Employee Acknowledgement Form

Welcome to CMG and Reichel Foods!

As a new employee, you will be provided with the website, username and password to view the new hire forms that you signed during your CMG Interview. Please sign and date the bottom of this form stating that you received your log in information.

CMG/ESSG/Reichel Foods Handbook

Healthcare Notice of Exchange and Website for Enrollment

Safety Policy

Drug and Alcohol Testing Policy

View Paystubs

Employee Notice of Employment and Wage

Website: <https://zenople.esgazure.com/login/cmg>

****do not fill out the login name or password. CMG will provide you with this information****

Login Name: 2052371886

Login Password: Mathis 9545

I hereby acknowledge that I have been provided with the login information to view the items listed above. I understand that it is my responsibility to read and follow each document provided to me and that if I have any questions concerning the content, it is my responsibility to address my questions with a CMG representative. I also hereby waive any claim, now or in the future, that I did not receive, did not read or did not comprehend the items or their contents.

Signature: _____ **Date:** _____

Employee Photo Release Form

I, _____ agree to let Reichel Foods use my picture for internal security purposes. I also agree to submit a written request to Reichel Foods if/when I wish my photo be removed from the company database.

Signature: _____

Date: _____

Emergency Contact Information

Please list at least one person with one working phone number. We will only contact the name(s) listed below if we are unable to get ahold of you or if there is an emergency.

Contact #1

Contact #2

Name: _____

Name: _____

Relationship: _____

Relationship: _____

Phone Number: _____

Phone Number: _____

Additional information you want ESSG and our client to know in the event of an emergency:

This information will remain confidential and will only be used in the case of an emergency.

Authorization to Enter New Hire Information

By signing below, I authorize a member of Corporate Management Group to enter my new hire paperwork into ESSG's online Zenople Employee Portal. I understand that I will be provided access via login name and password to view forms that have been entered on my behalf.

Signature: _____

Date: _____

Insurance Information

I understand that the CMG Staff defaults to decline insurance when entering my new hire paperwork unless specified otherwise during my interview. I understand that I have 30 days after my job offer to apply for insurance through ESSG via the log in information provided to me.

Signature: _____

Date: _____

Electronic W-2 Consent

The IRS has approved employers to send W-2's electronically to employees. You will receive your W-2 faster and have access to your W-2 at anytime.

Would you like to receive your W-2 statement electronically? Yes ☐ No ☐

Email: _____