



FAXED

SENSITIVE BUT UNCLASSIFIED

Department of Homeland Security
E-Verify

Report Prepared: 05/11/2010
Page: 1 of 1

Case Verification Number: 2010131165954XT

Initial Verification:

Last Name:	Khaleck	First Name:	John
Middle Initial:		Maiden Name:	
Social Security Number:	569-77-9003	Date of Birth:	12/26/1983
Hire Date:	05/10/2010	Citizenship Status:	Citizen of the United States
Alien Number:		I-94 Number:	
Document Type:	List B, C Documents	Doc. Expiration Date:	
Initiated By:	ESAG6409	Initiated On:	05/11/2010

Initial Verification Results:

Initial Eligibility: EMPLOYMENT AUTHORIZED

SSA Referral:

Referral By: Referral Date:

Verification Response:

Eligibility: Response Date:

SSA Resubmittal:

Last Name:		First Name:	
Middle Initial:		Maiden Name:	
Social Security Number:		Date of Birth:	
Initiated By:		Initiated On:	

Resubmittal Verification Results:

Eligibility:

Additional Verification:

Comments:
Initiated By: Initiated On:

Verification Response:

Eligibility: Response Date:

DHS Referral:

Referral By: Referral Date:

DHS Referral Results:

Eligibility: Response Date:

Case Resolution:

Resolve Option:	Resolved Authorized	Resolved On:	05/11/2010
Resolved By:	ESAG6409		

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DMV CALIFORNIA DMV
IDENTIFICATION CARD
EXPIRES 12-26-13 **D1395163**

JOHN KHALECK
645 N WATTS AVE
STOCKTON CA 95205

SEX: M HAIR: BLK EYES: BRN
HT: 5-06 WT: 160 DOB: 12-26-83

John Khaleck
02/27/2008 5 17 03 FD/13

SOCIAL SECURITY
569-77-9003
THIS NUMBER HAS BEEN ESTABLISHED FOR
JOHN KHALECK
John Khaleck
SIGNATURE
USA 09/10/2009



APPLICATION FOR EMPLOYMENT

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

PLEASE COMPLETE PAGES 1-5 DATE _____

Name Khaleck John
Last First Middle Maiden

Present address 4120 Highway 14 E Rochester MN 55904
Number Street City State Zip

How long opening Social Security No. 569 - 77 - 9003

Telephone 507 271-8772

If under 18, please list age _____ Referred by walkin

Position applied for (1) packing Days/hours available to work
 and salary desired (2) opening No Pref _____ Thur 5am 2pm
 (Be specific) Mon 5am 2pm Fri 5am 2pm
 Tue 5am 2pm Sat _____
 Wed 5am 2pm Sun _____

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

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

When available for work? anytime

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>Franklin High</u>	<u>CA Stockton</u>	<u>11 grade</u>	<u>NO</u>
College				
Bus. or Trade School				
Professional School				

HAVE YOU EVER BEEN CONVICTED OF A CRIME? No Yes

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. _____



ENTERED