11:45 A
6/24

CMG
CORPORATE MANAGEMENT GROUP

CMG APPLICATION FOR EMPLOYMENT

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

PLEASE COMPLETE PAGES 1-5   DATE 6-23-14

Name Holseth, David Lee Maiden Steffen
Last First Middle Maiden

Present address ~~___~~ 510-Buchanan ~~___~~ Ave.,
Number Street
Springvalley   MN.   55975
City   State   Zip

Social Security No. 481 -02 -3094

Telephone (507) 316-1795   E-Mail _____

If under 18, please list age _____   Referred by Craigslist

Position applied for (1) Sanitation
and salary desired (2) 12.00
(Be specific)
          12

Shift available to work
1st _____
2nd _____   wkds OK KS 6/23
3rd X   ok KS

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

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

When available for work? 2wks notice → to textile

Aug 5th - 12th family Reunion
Arizona already planned

Do you have responsibilities or commitments that will prevent you from meeting specified work schedules?
X No ___ Yes   If so, please explain _____

Do you anticipate any absences from work on a regular basis?
X No ___ Yes   If so, please explain _____

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School	Faith Christian	Marion Rd SE.	12 yrs	
College				
Bus. or Trade School				
Professional School				

Revised February 2012

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

What is your means of transportation to work? My GMC Sierra

Driver's license number A-081-009-603-209 State of issue MN.

Operator ___ Commercial (CDL) _X_ Chauffeur ___

Expiration date 7-5-2014

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

    If so, how many? _____

Have you had any moving violations during the past three years? ___ Yes _X_ No

    If so, how many? _____

Please list two references other than relatives or previous employers.

Name Diane Weber   Name Mike Casey

Position ~~Store~~ Sander   Position Cook

Company Halcon   Company A&W Spingvalley

Address 2013-Falcon Terrace   Address 510-Buchanan Ave

    Nw. Stewartville Mn.   Spring valley Mn. 55975

Telephone (507) 316-8716   Telephone (507) 273-7692

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 _____

has Class B CDL passenger

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.**

looking for new opportunity
has done some sanitation

Name David Holseth	Supervisor name Wanita Andrews	
Position Washer Operater	Employment dates	Pay or salary
Company Textile Care Services	From Aug1 2011	Start 8.74
Address 225-35th St, SE. Rochester Mn.	To Still There	Final 12:45
Telephone (507) 252-7500	Your last job title _____	

Reason for leaving (be specific) Haven't yet But need something with more pay

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. I started on the Clean side for a year and a half and was to fast for machines. So they put me Back to soil sorter to fast, so then they put me to the washers.

Name David Holseth	Supervisor name Michelle Steffl.	
Position Head Maintenec Engineer	Employment dates	Pay or salary
Company Country Inn + suites	From Aug 1st 08	Start 9.50
Address 77-woodlak Dr. SE. Rochester Mn.	To July 2011	Final 9.50
Telephone (507) 287-6756	Your last job title _____	

Reason for leaving (be specific) We were always on a wage freeze

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. I was a head maint engineer and i would check the chemical in the Pool + hot tub. And i would also do Plumbing + electrical and checking trash and whatever else the job called me for.

Revised February 2012

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 David Holseth	Supervisor name Geno wendt
Position Residential Driver	
Company Waste Management	**Employment dates** / **Pay or salary**
Address 6670 - 11th AVE SW Rochester MN.	From / Start
Telephone (~~507~~) 960-0008	To 3 yrs / Final
	Your last job title Residential Driver

Reason for leaving (be specific) Have to explain Dr orders - broke foot

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. Residential Driver. Filling out my Paperwork in the morning, doing a walkaround of my truck in the moring. Then going out and Picking up the trash and taking it to the Burner then taking the Truck back to the lot filling up with ~~gas~~ Diesel fuel and turning in my paper work.

Name	Supervisor name
Position	
Company	**Employment dates** / **Pay or salary**
Address	From / Start
	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~~ X No

Did you complete this application yourself X 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: 6-23-14

Preliminary Questions

Name: David

Date: 6|23

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

To be completed during interview only

Date of interview 6|23|14

Have you ever been convicted of a crime? Yes_____ No X

Explain

Incident_____

_____

_____

Employee Signature_____

Interviewer Signature_____

Applicant Interview Score Card

Name __David__ Date of Interview __6|23__

Position/Shift Assignment __3(5)__ Stand by Position _____

Rating Weak (1) to Strong (5)

1. Understanding of English conversation   1 2 3 4 5
2. Speaks English Fluently   1 2 3 4 5
3. Work experience related to job-food industry 1 2 3 4 5
4. Work history-working presently, yrs in workforce 1 2 3 4 5
5. Criminal Background information   1 2 3 4 5
6. Possesses required New Hire documentation (I9) 1 2 3 4 5
7. Personality-friendly, pleasant, sense of humor 1 2 3 4 5
8. Appearance-well groomed, cleanliness   1 2 3 4 5
9. Meets requirements to work w/pork, peanuts & soy 1 2 3 4 5
10. Shift availability-prefers shift that is available for 1 2 3 4 5
    Open positions, willing to be flexible to shifts available

Total possible points **50** pts. Total points scored   __50__

Former Employer Rating Bonus Points 1-20   _____

Interviewer: _____   Total Points __50__

Date: _____ 6|23|14

RICK & ROSE

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

TEST RESULTS RECORD

Test Reference Number _____ Name of Collector _____

COMPANY INFORMATION

Company Name _Reichel Foods_____ Phone _923·4955_ Fax _____

Address _207 Commercial A Sw_ City _Rochester_ State/Province _MN_ Zip/Postal Code _55903_

DONOR INFORMATION

Employee I.D. _____

Last Name _Holseth_ First Name _David_

Type of Identification Provided: ☐ Driver's License ☑ Employee Photo I.D. ☐ Other _____

Reason for test: ☑ Pre-employment ☐ Random ☐ Reasonable cause ☐ Post-accident ☐ Other _____

CERTIFICATION

I hereby certify that the specimen provided is my own and has not been substituted or adulterated. I further agree and grant permission for the testing of my specimen for drug metabolites and alcohol.

signature   _7/1/14_ _9:30A_
Donor signature   Date / Time

I hereby certify that I collected the specimen provided by the aforementioned Donor and that it was not substituted or adulterated to the best of my knowledge.
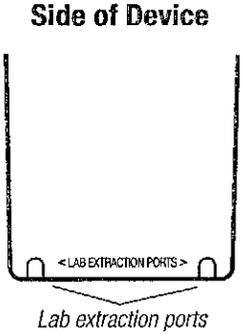
Kelsey Adikkil   _7/1/14_ _9:30A_
Collector signature   Date / Time

_N/A_   _N/A_
Laboratory signature   Date / Time received

TEST RESULTS

Date/Time Collected _7/1/14_ _9:30A_

Time Interpreted _____

NOTE: Lab personnel obtain specimen samples by puncturing the lab extraction ports on the side of device with a needle and syringe and drawing out the sample.

Side of Device

< LAB EXTRACTION PORTS >

Lab extraction ports

Cut out this panel to copy/scan results

Drug Name	Symbol	Negative	Positive	Not Tested
Alcohol	ALC	☐	☐	☑
Amphetamine	AMP	☐	☐	☐
Buprenorphine	BUP	☐	☐	☐
Benzodiazepine	BZO	☐	☐	☐
Cocaine	COC	☐	☐	☐
EDDP	EDDP	☐	☐	☑
Marijuana	THC	☐	☐	☐
Methadone	MTD	☐	☐	☐
Methamphetamine	MET	☐	☐	☐
Opiates	OPI	☐	☐	☐
Oxycodone	OXY	☐	☐	☐
Phencyclidine	PCP	☐	☐	☐
_____	_____	☐	☐	☐
_____	_____	☐	☐	☐

Notes / Comments _____

DC200E 1211