

ENTERED
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Wed. 10/8 @ 2pm

CMG APPLICATION FOR EMPLOYMENT

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

PLEASE COMPLETE PAGES 1-5 DATE Oct. 01. 2014

Name TUENTES-CRUZ JESUS M.
Last First Middle Maiden

Present address 140 1ST ST SE
Number Street
PLAINVIEW MN 55904
City State Zip

Social Security No. 471 - 55 - 4857

Telephone 507 272-5097 E-Mail jtuentesacruz0219@gmail.com

If under 18, please list age _____ Referred by _____

Position applied for (1) _____ and salary desired (2) <u>13.50~</u> (Be specific)	Shift available to work 1 st <input checked="" type="checkbox"/> 2 nd _____ 3 rd _____
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How many hours can you work weekly? _____ Can you work nights? NOT.

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

When available for work? 2 WEEK NOTES~

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>MEXICO</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? OWN CAR

Driver's license number W613220991510 State of issue _____

Operator ___ Commercial (CDL) Chauffeur ___

Expiration date 04-20-2016

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 Julio Loyo

Name BILL MERCHELEWITZ

Position Supervisor

Position GENERAL MANAGER

Company LAKE SIDE FOODS

Company LAKE SIDE FOODS

Address 1035 WEST BROADWAY
PLAINVIEW, MN

Address 1035 WEST BROADWAY
PLAINVIEW, MN

Telephone (507) 534-3141
507-251-0754

Telephone (507) 534 3141 EXT. 5084

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>LAKESIDE FOODS INC.</u>	Supervisor name <u>BILL MERCHLEWITZ</u>	
Position <u>COOKS OPERATOR.</u>	Employment dates	Pay or salary
Company _____	From <u>FEB. 2013</u>	Start <u>13.75⁼⁼</u>
Address <u>1035 WEST BROADWAY</u>	To <u>NOV. 2014</u>	Final <u>15.50⁼⁼</u>
<u>PLAINVIEW MN.</u>	Your last job title _____	
Telephone <u>(507) 534 3141</u>		

Reason for leaving (be specific) COMPANY IS CLOSING OPERATIONS

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company.

FORK LIFT DRIVER -
COOK OPERATOR -

Name _____	Supervisor name _____	
Position <u>DRIVER</u>	Employment dates	Pay or salary
Company <u>SWIFT TRANSP.</u>	From <u>AUG. 2012</u>	Start <u>40¢ m.</u>
Address <u>INV. GROVE MN</u>	To <u>FEB. 2013</u>	Final <u>50¢ m.</u>
Telephone <u>(651) 554 1400</u>	Your last job title _____	

Reason for leaving (be specific) BAD COMMUNICATION WAIT DISPATCH.

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company.

DRIVER OTR -

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? _____

**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: Oct. 1, 2014