

CORPORATE MANAGEMENT GROUP

Employment Application

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

Office Number: 507-838-5994

Office Address: 1825 7th St NW Rochester, MN 55901



Applicant Information

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

Full Name: (Last Name, First Name) Kader mohamed Sharif Date: 6/3/24
Address: (Street Address) 2010 175 street se (Apt. /Unit #) 98
(City) Rochester (State) MN (ZIP Code) _____
Phone: 507 617 7578 Email: sharifkader88@gmail.com
Social Security No. 068310714 Date Available: Tomorrow
Position Applied for: Any position Desired Wage: _____
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? Friend Referral Name: mohamed
If under 18, please list age: 36
Do you have responsibilities or commitments that will prevent you from meeting specified work schedules? No __ Yes

Previous Employment

Company: Reedwood Phone: _____
Address: _____ Supervisor: _____
Job Title: _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: LGO Another state
May we contact your previous supervisor for reference? __ Yes __ No

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
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 _____ Date: _____

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Full Name: (Last Name, First Name) Kader Sharif Date: _____

Address: (Street Address) 2010 175 Street SE (Apt. /Unit #) 98

(City) Rochester (State) MN (ZIP Code) 55904

Phone: 507 517 7578 Email: Sharif Kader888@gmail.com

Social Security No. 068 31 0714 Date Available: _____

Position Applied for: _____ Desired Wage: _____

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? friend Referral Name: Ammed

If under 18, please list age: yes

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

Previous Employment

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Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for reference? __ Yes __ No

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Signature of applicant _____ Date: _____