



FAXED

SENSITIVE BUT UNCLASSIFIED

Department of Homeland Security  
E-Verify

Report Prepared: 10/04/2010  
Page: 1 of 1

Case Verification Number: 2010277112337ZU

**Initial Verification:**

Last Name:	Mohamed	First Name:	Kadra
Middle Initial:		Maiden Name:	
Social Security Number:	*** ** 7144	Date of Birth:	01/01/1971
Hire Date:	09/29/2010	Citizenship Status:	A citizen of the United States
Alien Number:		I-94 Number:	
Passport or Passport Card Number:	076924726	Visa Number:	
Document Type:	Unexpired U.S. Passport or U.S. Passport Card	Doc. Expiration Date:	08/06/2013
Submitted By:	ESAG6409	Submitted On:	10/04/2010

**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:
Submitted By:	Submitted On:

**Resubmittal Verification Results:**

Eligibility:

**Additional Verification:**

Comments:  
Submitted By: Submitted On:

**Verification Response:**

Eligibility: Response Date:

**DHS Referral:**

Referral By: Referral Date:

**DHS Referral Results:**

Eligibility: Response Date:

**Photo Matching Results:**

Determination:

**Additional DHS Referral:**

Referral By: Referral Date:

**Additional DHS Referral Results:**

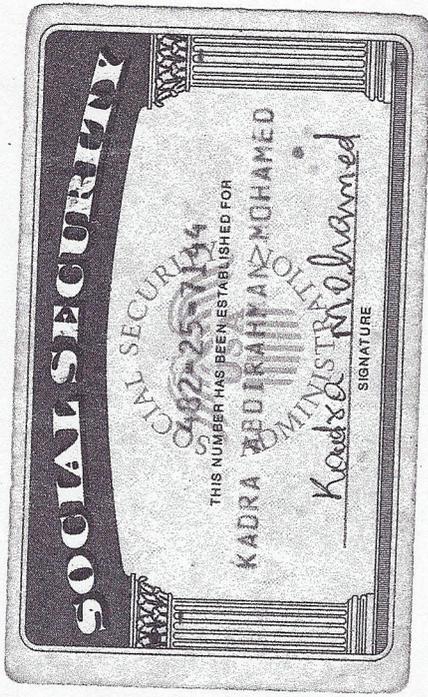
Eligibility: Response Date:

**Case Resolution:**

Resolve Option:	The employee continues to work for the employer after receiving an Employment Authorized result.		
Resolved By:	ESAG6409	Resolved On:	10/04/2010

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FAXED



ENTERED



9-29-10 9<sup>30</sup>A

OK w/parent

### APPLICATION FOR EMPLOYMENT

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

PLEASE COMPLETE PAGES 1-5 DATE 9-22-2010

Name MOHAMED KADRA ABDIRAHMAN  
Last First Middle Maiden

Present address 412 14<sup>th</sup> ST. SE #108 Rochester MN 55904  
Number Street City State Zip

How long 3 yrs Social Security No. 482-25-7144

Telephone (507) 289-7941

If under 18, please list age \_\_\_\_\_ Referred by \_\_\_\_\_

Position applied for (1) \_\_\_\_\_ Days/hours available to work  
 and salary desired (2) \_\_\_\_\_  
 (Be specific) No Pref \_\_\_\_\_ Thur 12-8  
 Mon 12-8 Fri 12-8  
 Tue 12-8 Sat \_\_\_\_\_  
 Wed 12-8 Sun \_\_\_\_\_

How many hours can you work weekly? \_\_\_\_\_ Can you work nights? \_\_\_\_\_

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

When available for work? immediate

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>Sakawadin</u>	<u>Somalia</u>	<u>12 yrs</u>	<u>general</u>
College	<u>RCTC</u>	<u>Rochester</u>	<u>2 yrs</u>	<u>Associate degree</u>
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. \_\_\_\_\_

**APPLICATION FOR EMPLOYMENT**

**MILITARY**

HAVE YOU EVER BEEN IN THE ARMED FORCES? \_\_ Yes  No

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD? \_\_ Yes  No

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>Manpower</u>	Supervisor name <u>Joe</u>	
Position <u>Assembly</u>	Employment dates	Pay or salary
Company <u>IBM</u>	From <u>August 2007</u>	Start <u>8:50</u>
Address _____	To <u>September 2008</u>	Final <u>9:90</u>
Telephone (____) _____	Your last job title <u>Assembly</u>	

Reason for leaving (be specific) Laid-off

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.