



Monday 10:00am
ENTERED
6/27/14

CMG APPLICATION FOR EMPLOYMENT

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

PLEASE COMPLETE PAGES 1-5

DATE 6-27-14

Name Lott Justin Allen
Last First Middle Maiden

Present address 337 S. McKnight Rd
Number Street
St. Paul MN 55119
City State Zip

Social Security No. 481-65-9233

Telephone (612) 362-7370 E-Mail _____

If under 18, please list age _____ Referred by _____

Position applied for (1) Sanitation
and salary desired (2) \$9.75+
(Be specific)

Shift available to work
1st ☒
2nd ☒
3rd ☒

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

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

When available for work? ASAP

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 Vacation Aug 28, 2014 - Sep 3, 2014

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School	<u>Jefferson high school</u>	<u>Monroeville, AZ</u>	<u>4</u>	
College				
Bus. or Trade School				
Professional School				

APPLICATION FOR EMPLOYMENT

DO YOU HAVE A DRIVER'S LICENSE? ☒ Yes ☐ No

work permit only

What is your means of transportation to work? *car*

Driver's license number *X1649298883914* State of issue *MN*

Operator ☐ Commercial (CDL) ☐ Chauffeur ☐

Expiration date *08 29 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 *Richard Young* Name ~~Richard Young~~ *John*

Position *construction* Position *various*

Company *Young Construction* Company *command center*

Address _____ Address _____

Telephone *(651) 387-6098* Telephone *(651) -592-1127*

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 _____	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.		

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 _____ Position _____ Company _____ Address _____ Telephone (____) _____	Supervisor name _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Employment dates</td> <td style="width: 50%;">Pay or salary</td> </tr> <tr> <td>From</td> <td>Start</td> </tr> <tr> <td>To</td> <td>Final</td> </tr> </table> Your last job title _____	Employment dates	Pay or salary	From	Start	To	Final
Employment dates	Pay or salary						
From	Start						
To	Final						

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 _____ Position _____ Company _____ Address _____ Telephone (____) _____	Supervisor name _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Employment dates</td> <td style="width: 50%;">Pay or salary</td> </tr> <tr> <td>From</td> <td>Start</td> </tr> <tr> <td>To</td> <td>Final</td> </tr> </table> Your last job title _____	Employment dates	Pay or salary	From	Start	To	Final
Employment dates	Pay or salary						
From	Start						
To	Final						

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

Jesti Jell

Date:

6-27-14

Applicant Name: Justin Lott.

Date: 6-27-14.

Interviewer: Maby Arias.

1. How did you hear about Corporate Management Group? Ad? Referral?

Resume.

2. What position(s) are you applying for today? (Sanitation / Production, etc...)

Sanitation.

3. What specifically about the position(s) / company brought you here to apply?

-4. What are your pay expectations? (Make sure to explain our pay structure)

5. What shift(s) do you prefer to work?

3rd.

6. Are you available to work weekends?

yes.

7. How do you plan to get to and from work?

Car.

8. What would (Find a reference name listed) tell me about you?

9. Tell me about what you did at (Pick a previous position listed on application)?

- Why did you leave that position?
- If relevant – Why were you terminated?

10. Which of your previous positions did you like the most? Why?

11. Which of your previous positions did you like the least? Why?

12. Do you currently have any limitations or restrictions that we should be aware when considering you for a position? If so, What? (It does not eliminate them from opportunity we want to make the right match)

None/.

MINNESOTA

IDENTIFICATION CARD
NOT A DRIVER'S LICENSE

JUSTIN ALLEN LOT

337 S MCKNIGHT RD

SAINT PAUL, MN 55119

Date of Birth

08-29-1987

Sex

M

Eyes

BRN

Class

ID

Height

5-10

Weight

240

ISSUED

10-2013

EXPIRES

08-29-2016

JUSTIN

ALL

THE GREAT SEAL OF THE STATE OF MINNESOTA

X644248883914

ALL SECURE

931-65-9233

THIS NUMBER HAS BEEN ESTABLISHED FOR

JUSTIN ALLEN LOT

SIGNATURE

MINNESOTA
IDENTIFICATION CARD
NOT A DRIVER'S LICENSE



JUSTIN ALLEN LOTT
 337 S MCKNIGHT RD
 SAINT PAUL, MN 55115

Date of Birth **08-29-1987**
 Sex **M** Eyes **BRN** Class **ID**
 Height **5-10** Weight **240**

ISSUED 10-2013 EXPIRES 08-29-2016

Justin Lott

X64424883914

MINNESOTA SOCIAL SECURITY

931-65-9233

THIS NUMBER HAS BEEN ESTABLISHED FOR
 JUSTIN ALLEN LOTT

SIGNATURE