

**FAXED****SENSITIVE BUT UNCLASSIFIED****Department of Homeland Security****Report Prepared: 04/20/2010****E-Verify****Page: 1 of 1****Case Verification Number: 2010110150954BK****Initial Verification:**

Last Name:	Combs	First Name:	Melvin
Middle Initial:		Maiden Name:	
Social Security Number:	468-86-9097	Date of Birth:	01/18/1963
Hire Date:	04/20/2010	Citizenship Status:	Citizen of the United States
Alien Number:		I-94 Number:	
Document Type:	List B, C Documents	Doc. Expiration Date:	
Initiated By:	ESAG6409	Initiated On:	04/20/2010

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:	
Initiated By:		Initiated On:	

Resubmittal Verification Results:

Eligibility:

Additional Verification:Comments:
Initiated By: Initiated On:**Verification Response:**

Eligibility: Response Date:

DHS Referral:

Referral By: Referral Date:

DHS Referral Results:

Eligibility: Response Date:

Case Resolution:

Resolve Option:	Resolved Authorized		
Resolved By:	ESAG6409	Resolved On:	04/20/2010

SENSITIVE BUT UNCLASSIFIED



FAXED

MINNESOTA
IDENTIFICATION CARD
NOT A DRIVER'S LICENSE

MARION LAWRENCE COMBS
343 CASE AVE #2W
ST PAUL, MN 55117

Date of Birth 01-18-1963
Sex M Eyes BRN Class ID
Height 5-11 Weight 220
ISSUED 11-2008 EXPIRES 01-18-2012

Marion L Combs

M863195901017



SOCIAL SECURITY

THIS NUMBER HAS BEEN ESTABLISHED FOR:

MELVIN COMBS
1000 STATE ST
ST PAUL MN 55102

Marion Combs SIGNATURE

868-88-9097





APPLICATION FOR EMPLOYMENT

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

PLEASE COMPLETE PAGES 1-5 DATE _____

Name Combs MARION
Last First Middle Maiden

Present address 1939 Center St W Rochester Mn 55902
Number Street City State Zip

How long 6 months Social Security No. 468-86-9097

Telephone (651) 231-8220

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 _____
 Mon _____ Fri _____
 Tue _____ Sat _____
 Wed _____ Sun _____

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 _____

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School	<u>Washington</u>	<u>11041 MARION</u>	<u>4</u>	
College				
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>Team Personnel</u>		Supervisor name _____	
Position <u>carpenter</u>		Employment dates	Pay or salary
Company _____		From <u>10 2000</u>	Start <u>\$ 9.00</u>
Address <u>259 University</u>		To <u>10 2010</u>	Final <u>9.00</u>
<u>St Paul Mn. 55103</u>		Your last job title <u>laborer</u>	
Telephone <u>(651) 793-9000</u>			

Reason for leaving (be specific) moved to Rochester

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

various different jobs.
The last job was for Slumber land I built chairs.

Name <u>Free lance</u>		Supervisor name _____	
Position <u>laborer</u>		Employment dates	Pay or salary
Company _____		From <u>10-03</u>	Start <u>\$ 7.00 hr</u>
Address <u>2393 Rice Str.</u>		To <u>10-2010</u>	Final <u>\$ 9.00 hr</u>
<u>Roseville Mn. 55113</u>		Your last job title <u>laborer</u>	
Telephone <u>(651) 490-9990</u>			

Reason for leaving (be specific) moved to Rochester

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

various different jobs - temp service
assembling