

CORPORATE MANAGEMENT GROUP

Employment Application

Office Hours: 9am-4pm Mon-Fri

Office Number: 651-666-3883

Office Address: 404 Broadway Ave St. Paul Park, MN 55071



Applicant Information

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

Please fully complete pages 1-2

Full Name: (Last Name, First Name) Rosbi Medina Date: 04-03-17

Address: (Street Address) 510 Orange Av W St Paul (Apt./Unit #) _____

(City) St Paul (State) MN (ZIP Code) _____

Phone: 651-442-0219 Email: _____

Social Security No. 494-37 2542 Date Available: _____

Position Applied for: PACK Desired Salary: 11

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? facebook Referral Name: _____

If under 18, please list age: _____

Education				
Type of School	Name of School	Location (Complete Mailing Address)	Number of Years Completed	Major & Degree
High School		MEXICO		
College				
Bus. Or Trade School				
Professional School				

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Previous Employment

Company: NC Daniels Phone: 651-686-52-10

Address: Engen Supervisor: _____

Job Title: Employee Starting Salary: \$ 8.00 Ending Salary: \$ 11.00

Responsibilities: Cashier

From: 2008 To: 2016 Reason for Leaving: better opportunity

May we contact your previous supervisor for reference? Yes No

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for reference? Yes No

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for reference? Yes No

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for reference? Yes No

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: [Signature] Date: 03-17