

CORPORATE MANAGEMENT GROUP



Employment Application

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

Office Number: 320-281-5614 Office Cell: 320-250-4380

Office Address: 245 Industrial Blvd, Sauk Rapids, MN 56379

Applicant Information

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

Full Name: Merodol ~~AGA AD~~ AGADA Date: _____

Address: (Street Address) 1540 MN-24 (Apt. /Unit #) 204

(City) Saint Cloud (State) MN (ZIP Code) 56201

Phone: 320-316-6199 Email: MerAgada94@yahoo.com

Are you authorized to work in the U.S? Yes No

Social Security No. 870-19-7149 Date Available: _____

Position Applied for: _____ Desired Wage: _____

Shift Available to work: 1st 2nd 3rd Employment desired: Full-Time Part-Time

How did you hear about us? _____ Referral Name: _____

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

Military Training (List dates and training received) _____

Previous Employment

PLEASE LIST DETAILS FOR YOUR 2 LATEST EMPLOYMENTS, STARTING WITH THE MOST RECENT.

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

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