



ENTERED

CMG

CORPORATE MANAGEMENT GROUP

### APPLICATION FOR EMPLOYMENT

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

PLEASE COMPLETE PAGES 1-5

DATE 1/24/10

Name Buchholz Michael John  
Last First Middle Maiden

Present address 1609 10<sup>th</sup> St SE #7 Rochester MN 55904  
Number Street City State Zip

How long 15 yrs Social Security No. 477 - 25 - 2094

Telephone (507) 216-1805

If under 18, please list age - Referred by Nina Brady

Position applied for (1) \_\_\_\_\_ Days/hours available to work  
and salary desired (2) 1750 No Pref  Thur \_\_\_\_\_  
(Be specific) Mon \_\_\_\_\_ Fri \_\_\_\_\_  
Tue \_\_\_\_\_ Sat \_\_\_\_\_  
Wed \_\_\_\_\_ Sun \_\_\_\_\_

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

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

When available for work? Immediately

Do you have responsibilities or commitments that will prevent you from meeting specified work schedules?  
 No  Yes If so, please explain school m-th 4:00pm - 7:30 pm

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>Golden Hill High School</u>		<u>3</u>	<u>General</u>
College	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
Bus. or Trade School	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
Professional School	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>

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. Slight altercation at age sixteen resulted in a minoristic arrest, and damage to property charge. I went to treatment and have been on "straight narrow" for two years.

APPLICATION FOR EMPLOYMENT

DO YOU HAVE A DRIVER'S LICENSE?  Yes \_\_\_ No

What is your means of transportation to work? car

Driver's license number 272625345513 State of issue MN

Operator  Commercial (CDL) \_\_\_ Chauffeur \_\_\_

Expiration date 3-17-13

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? —

OFFICE USE ONLY

Typing \_\_\_ Yes \_\_\_ No

Personal Computer \_\_\_ Yes \_\_\_ No

10-key \_\_\_ Yes \_\_\_ No

\_\_\_ WPM

\_\_\_ PC \_\_\_ Mac

Word Processing \_\_\_ Yes \_\_\_ No

Other \_\_\_\_\_

\_\_\_ WPM

Skills \_\_\_\_\_

Please list two references other than relatives or previous employers.

Name Nina Beasley

Name Chance Bastell

Position \_\_\_\_\_

Position Press operator

Company Riechel Foods

Company Menasha

Address \_\_\_\_\_

Address \_\_\_\_\_

Telephone (67) 202-8003

Telephone (881) 249-3362

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

**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>Quality System Components</u>		Supervisor name <u>Bryan Fields</u>	
Position <u>Warehouse Laborer</u>		Employment dates	Pay or salary
Company <u>12571 Olives Ave, Ste 600</u>		From <u>4/10</u>	Start <u>10.00 hr</u>
Address <u>Burnsville, MN 55337</u>		To <u>12/10</u>	Final <u>10.60 hr</u>
Telephone <u>(952) 484-7475</u>		Your last job title <u>warehouse laborer</u>	

Reason for leaving (be specific) Seasonal layoff

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. I tie palletizing, and quality control.

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.

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Who were you referred by? Nina Bosley

May we contact your <sup>previous</sup> ~~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., (hereinafter called "the Company"),

I agree that:

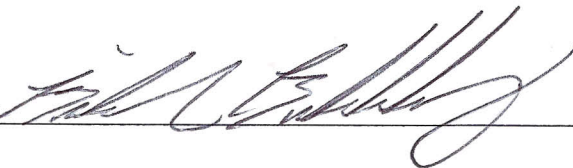
Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements and the like as they may exist 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 Corporate Management Group, Inc., 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 the Owner/Managing Member of the Company. Both the undersigned and Corporate Management Group, Inc. may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company 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 called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, all previous employers (unless otherwise indicated), references and others and hereby release the Company from any liability as a result of such contact.

I understand that, in connection with the routine processing of your employment application, the Company 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, the Company, 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 the Company 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 the Company is terminable at will for any reason by either party.

Signature of applicant



Date:

11/29/10