

SENSITIVE BUT UNCLASSIFIED

Department of Homeland Security
E-Verify

Report Prepared: 09/20/2010
Page: 1 of 1

Case Verification Number: 2010263133456DW

Initial Verification:

Last Name:	Huernekens	First Name:	Michael
Middle Initial:		Maiden Name:	
Social Security Number:	*** ** 6144	Date of Birth:	03/03/1988
Hire Date:	09/15/2010	Citizenship Status:	A citizen of the United States
Alien Number:		I-94 Number:	
Document Type:	List B and C Documents	Doc. Expiration Date:	
Submitted By:	ESAG6409	Submitted On:	09/20/2010

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:	
Submitted By:		Submitted On:	

Resubmittal Verification Results:

Eligibility:

Additional Verification:

Comments:
Submitted By: Submitted On:

Verification Response:

Eligibility: Response Date:

DHS Referral:

Referral By: Referral Date:

DHS Referral Results:

Eligibility: Response Date:

Case Resolution:

Resolve Option:	The employee continues to work for the employer after receiving an Employment Authorized result.		
Resolved By:	ESAG6409	Resolved On:	09/20/2010

SENSITIVE BUT UNCLASSIFIED

 FAXED

SOCIAL SECURITY

SOCIAL SECURITY
THIS NUMBER HAS BEEN ESTABLISHED FOR
MICHAEL ANTHONY HUENNEKENS
MINN
Michael Huennekens
SIGNATURE

MINNESOTA
INSTRUCTION PERMIT

MICHAEL ANTHONY HUENNEKENS
1702 18TH AVE NW
ROCHESTER, MN 55901

Date of Birth 03-03-1988 AGE 18 03-03-2006
Sex M Eyes BLU Class IP
Height 5-7 Weight 195
ISSUED 12-2006 EXPIRES 12-15-2008
Michael Huennekens

UNDER 21

F736041317116

Michael Huennekens

09/15/2010

Preliminary Questions

1. We run background studies on all employees-do you have any issues with this? **No**
2. What kind of work experience do you have? **Assembly experience**
3. Are you legal to work in the United States? **Yes**
4. Do you have documentation? **Yes**
5. Are you able to work with pork? **Yes**
6. Are you allergic to peanuts? **No**
7. Are you able to work in a wet and cold environment? **Yes**
8. How did you hear about Reichel Foods? **Worked through Masterson**
9. Worked in a warehouse before? **Yes**
10. Do you have reliable transportation? **Yes**
11. What shift are you looking? **3rd Shift**



9-15-10 1:30 pm



ENTERED

APPLICATION FOR EMPLOYMENT

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

PLEASE COMPLETE PAGES 1-5

DATE 9/9/10

Name Michael Huennkens
Last First Middle Maiden

Present address 1617 4th St NW Rochester MN 55901
Number Street City State Zip

How long 1 year Social Security No. 475 - 15 - 6144

Telephone (509) 208-6165

If under 18, please list age Referred by Jay Monicq

Position applied for (1) Line production
and salary desired (2) \$9.00
(Be specific)

Days/hours available to work
No Pref [checked] Thur
Mon Fri
Tue Sat
Wed Sun

How many hours can you work weekly? 65 Can you work nights? Yes

Employment desired [checked] FULL-TIME ONLY [] PART-TIME ONLY [checked] FULL- OR PART-TIME

When available for work? 9/9/10

Do you have responsibilities or commitments that will prevent you from meeting specified work schedules?
[checked] No [] Yes If so, please explain

Do you anticipate any absences from work on a regular basis?
[checked] No [] Yes If so, please explain

Table with 5 columns: TYPE OF SCHOOL, NAME OF SCHOOL, LOCATION (Complete mailing address), NUMBER OF YEARS COMPLETED, MAJOR & DEGREE. Rows include High School (JM, Rochester, 4, Diploma), College (RCTC, Rochester, 1, in progress), Bus. or Trade School (West Wood Online, California/California, 2), and Professional School.

HAVE YOU EVER BEEN CONVICTED OF A CRIME? [checked] 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>Green St Solutions</u>	Supervisor name <u>Rich</u>	
Position <u>Sales rep</u>	Employment dates	Pay or salary
Company <u>ECO Orange</u>	From <u>7/7/10</u>	Start <u>Commission</u>
Address <u>NA</u>	To <u>9/1/10</u>	Final
Telephone (<u>NA</u>)	Your last job title _____	

Reason for leaving (be specific) to much traveling -

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

Name And <u>Power Master/sons</u>	Supervisor name <u>Jay</u>	
Position <u>general laborer</u>	Employment dates	Pay or salary
Company <u>Richel Foods</u>	From	Start <u>7.50</u>
Address _____	To	Final
Telephone (____)	Your last job title _____	

Reason for leaving (be specific) Rab7 was taking auto fine

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