



Preliminary Questions

For CMG use only

Name: Adon Nelson

Date: 06-5-2017

1. If hired are you willing to take a drug test? yes
2. Do you have any known food allergies to soy, wheat, peanuts, or milk? No
3. Are you able to work with pork? yes

To be completed during or after interview

Have you ever been convicted, plead guilty or contest to a Felony? Yes _____ No X

If yes, please list when, where and the nature of the offense(s):

Have you ever been convicted, plead guilty or contest to a Misdemeanor? Yes _____ No X

If yes, please list when, where and the nature of the offense(s):

You will not be denied employment solely because you answer "Yes" above or because you have been convicted of a crime, felony or misdemeanor. The company considers many individualized factors in evaluating a job candidate, including but not limited to, with respect to criminal history, the nature and date of any offense, the surrounding circumstances, and the nature of the position for which you apply.

By signature below, I certify that the information provided above is true and complete that I have discussed the above with my interviewer as disclosed. I understand and agree that any misrepresentation by me will be sufficient cause to eliminate me from consideration for employment and/or terminate employment at any time if I have been employed.

Applicant signature: Adon Nelson Date: 6-5-2017

Authorization

Authorization: By signing below, you authorize: (a) backgroundchecks.com ("BGC") and/or Orange Tree Employment Screening to request information about you from any public or private information source; (b) anyone to provide information about you to BGC and/or Orange Tree Employment Screening; (c) BGC and/or Orange Tree Employment Screening to provide Employer Solutions Staffing Group, LLC one or more reports based on that information; and (d) Employer Solutions Staffing Group, LLC ("ESSG") to share those reports with others for legitimate business purposes related to your employment. BGC and/or Orange Tree Employment Screening may investigate your education, work history, professional licenses and credentials, references, address history, social security number validity, right to work, criminal record, lawsuits, driving record, credit history, and any other information with public or private information sources. You acknowledge that a fax, image, or copy of this authorization is as valid as the original. You make this authorization to be valid for as long as you are an employee of ESSG.

The Consumer Financial Protection Bureau's "Summary of Your Rights under the Fair Credit Reporting Act" is attached to this authorization. If you are a New York applicant, a copy of New York's law on the use of criminal records is attached. By signing below, you acknowledge receipt of these documents.

Personal Information: Please print the information requested below to identify yourself for BGC.

Printed name:

Adam

First

M

Middle (☐
none)

Nelson

Last

Other names used: _____

Current county of residence: _____

Current and former addresses:

5-2015
from Mo/Yr

current
to Mo/Yr

1976 Toliet Ave

Street

St. Paul, MN, 55105

City, State & Zip

2013
from Mo/Yr

2015
to Mo/Yr

1628 N St. Louis Ave

Street

Chicago, IL, 60647

City, State & Zip

2010
from Mo/Yr

2013
to Mo/Yr

1976 Toliet Ave

Street

St. Paul, MN 55105

City, State & Zip

Some government agencies and other information sources require the following information when checking for records. BGC will not use it for any other purposes.

08-04-1987

Date of birth

471-15-5050

Social security number

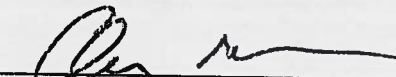
Y285255071515

Driver's license number & state

Adam Michael Nelson

Name as it appears on license

Report Copy: If you are applying for a job or live in California, Minnesota, or Oklahoma, you may request a copy of the report by checking this box: ☐.


Signature

06-08-2017
Date

*Of the United States,
in Order to form a more perfect Union,
establish Justice, insure domestic Tranquility,
provide for the common defence,
promote the general Welfare, and secure
the Blessings of Liberty to ourselves
and our Posterity, do ordain and establish this
Constitution for the United States of America.*



UNITED STATES OF AMERICA

Surname / Nom / Apellidos

NELSON

Given Names / Prénoms / Nombres

ADAM MICHAEL

Nationality / Nationalité / Nationalität

UNITED STATES OF AMERICA

Date of birth / Date de naissance / Fecha de nacimiento

04 Aug 1987

Place of birth / Lieu de naissance / Lugar de nacimiento

MINNESOTA, U.S.A.

Date of Issue / Date de délivrance: _____ / _____

6'000 000

Date of expiration / Date d'expiration / Fecha de caducidad:

2002

Environ Monit Assess (2008) 142:111–120

SPAIN

Sext / Sept / Sero

M

Authority / Autorité / Autoridad

1987-1988

Blackburn

USA



P<USANELSON<<ADAM<MICHAEL<<<<<<<<<<<<<<<<
4647141586USA8708047M2001241320647283<375138

MINNESOTA
DRIVER'S LICENSE



ADAM MICHAEL NELSON
1976 JULIET AVE
ST PAUL, MN 55103

Date of Birth 08-07-1987

Sex	Eyes	Class
M	BLU	D

Height	Weight
5-6	140

ISSUED 07-2016

EXPIRES 08-04-2020

Adam Nelson

Y285255071515

