



CMG APPLICATION FOR EMPLOYMENT

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

PLEASE COMPLETE PAGES 1-5		DATE <u>12-02-13</u>
Name <u>McGhee Octavia LeShawnta</u>		
<small>Last First Middle Maiden</small>		
Present address <u>1700 Hastings Ave</u>		
<small>Number Street</small>	<u>Newport</u>	<u>MN</u>
<small>City</small>	<small>State</small>	<u>55055</u>
<small>Zip</small>		
Social Security No. <u>358-80-9162</u>		
Telephone <u>(612) 961-5783</u>		E-Mail <u>Davisdhhb@gmail.com</u>
If under 18, please list age _____		<input checked="" type="checkbox"/> Referred by <u>Trinity DeBerry</u>
Position applied for (1) <u>open</u>		Shift available to work
and salary desired (2) <u>Open</u>		* 1 st <input checked="" type="checkbox"/>
<small>(Be specific)</small>		* 2 nd <input checked="" type="checkbox"/> <u>PREP</u>
		3 rd <input checked="" type="checkbox"/>
How many hours can you work weekly? <u>40+</u>		Can you work nights? <u>Yes</u>
Employment desired ___ FULL-TIME ONLY ___ PART-TIME ONLY <input checked="" type="checkbox"/> FULL- OR PART-TIME		
When available for work? <u>12-02-13</u>		
Do you have responsibilities or commitments that will prevent you from meeting specified work schedules?		
<input checked="" type="checkbox"/> No ___ Yes If so, please explain _____		
Do you anticipate any absences from work on a regular basis?		
<input checked="" type="checkbox"/> 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>Calumet Career</u>	<u>8731 may</u>	<u>3</u>	<u>N/A</u>
College				
Bus. or Trade School				
Professional School				

HAVE YOU EVER BEEN CONVICTED OF A CRIME? No Yes

If yes, explain number of conviction(s), nature of offense(s), dates of conviction(s), sentence(s) imposed, and type(s) of rehabilitation. _____

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DO YOU HAVE A DRIVER'S LICENSE? Yes No

What is your means of transportation to work? Public and/or Ride

Driver's license number _____ State of issue _____

Operator Commercial (CDL) Chauffeur

Expiration date _____

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? _____

Please list two references other than relatives or previous employers.

Name Dominique Kimble Name Angela Griffin

Position Telemarketing Position Telemarketing

Company _____ Company _____

Address Burnsville MN Address Burnsville MN

Telephone (651) 800-3589 Telephone (651) 336-0516

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MILITARY

HAVE YOU EVER BEEN IN THE ARMED FORCES? __ Yes No

ARE YOU NOW A MEMBER OF THE RESERVE OR NATIONAL GUARD? __ Yes No

Branch _____ 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>Northland Temp</u>	Supervisor name <u>Brian</u>	
Position <u>Maintainace</u>	Employment dates	Pay or salary
Company _____	From <u>10 a.m</u>	Start <u>9.25</u>
Address <u>2626 Central Ave</u>	To <u>6 a.m</u>	Final <u>9.25</u>
Telephone <u>(612) 706-0315</u>	Your last job title <u>Janitor @ Metrodome</u>	

Reason for leaving (be specific) Still do assignments when Avail.

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. Clean Metrodome from top to bottom.

Name <u>Pearson's Candy Co.</u>	Supervisor name <u>Afton</u>	
Position <u>Open</u>	Employment dates	Pay or salary
Company <u>Brandstad</u>	From <u>9.13</u>	Start <u>11.25</u>
Address <u>Roseville MN.</u>	To <u>10.13</u>	Final <u>11.25</u>
Telephone <u>(651) 1033-4080</u>	Your last job title _____	

Reason for leaving (be specific) NO assignments

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. worked in mailroom stamping and sending off letters.

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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>McDonald's</u>	Supervisor name <u>Linda Liebel</u>	
Position <u>Cashier / Crew</u>	Employment dates	Pay or salary
Company _____	From <u>10-11</u>	Start <u>7.50</u>
Address <u>1313 County Rd E</u>	To <u>9-12</u>	Final <u>7.75</u>
Telephone <u>(451) 433-1257</u>	Your last job title <u>Cashier</u>	

Reason for leaving (be specific) Sick grandmother.

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. open/close store, also prepare food, clean store also cover shifts following OSHA Guidelines.

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.

May we contact your present employer? Yes No

Did you complete this application yourself? Yes No

If not, who did? _____