

**FAXED**

SENSITIVE BUT UNCLASSIFIED

Department of Homeland Security
E-Verify

Report Prepared: 04/21/2010

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Case Verification Number: 2010110151735FX

Initial Verification:

Last Name:	Guzman	First Name:	Orlando
Middle Initial:		Maiden Name:	
Social Security Number:	471-55-8387	Date of Birth:	12/31/1977
Hire Date:	04/20/2010	Citizenship Status:	Lawful Permanent Resident (Alien # required)
Alien Number:	200431439	I-94 Number:	
Card Number:	MSC1009113221		
Document Type:	I-551	Doc. Expiration Date:	
Initiated By:	ESAG6409	Initiated On:	04/20/2010

Initial Verification Results:

Initial Eligibility: DHS Verification in Process

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:	
Initiated By:		Initiated On:	

Resubmittal Verification Results:

Eligibility:

Additional Verification:Comments:
Initiated By: Initiated On:**Verification Response:**

Eligibility: Employment Authorized Response Date: 04/21/2010

DHS Referral:

Referral By: Referral Date:

DHS Referral Results:

Eligibility: Response Date:

Case Resolution:

Resolve Option:	Resolved Authorized		
Resolved By:	ESAG6409	Resolved On:	04/21/2010

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U.S. DEPARTMENT OF HOMELAND SECURITY, U. S. Citizenship and Immigration Services

EMPLOYMENT AUTHORIZATION CARD

The person identified is authorized to work in the U.S. for the validity of this card.

NAME **GUZMAN, ORLANDO J**

Orlando Guzman

A# 200-431-439

CARD # **MSC1009113221**

Birthdate **12/3/1979** Category **PT** Sex **M**

Country **El Salvador**

Terms and Conditions **None**

U.S. DEPARTMENT OF HOMELAND SECURITY



NOT VALID FOR REENTRY TO U.S.

CARD VALID FROM **03/02/10** EXPIRES **03/01/11**



APPLICATION FOR EMPLOYMENT

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

PLEASE COMPLETE PAGES 1-5 DATE 04/19/10

Name Guzman, Orlando J.
Last First Middle Maiden

Present address 1532 10th st SE #6b Rochester Mn 55904
Number Street City State Zip

How long 1 year Social Security No. 471 - 55 - 8387

Telephone (507) 529 3693 2nd shift

If under 18, please list age _____ Referred by _____

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

How many hours can you work weekly? 40 or more Can you work nights? yes. ~~no~~

Employment desired ___ FULL-TIME ONLY ___ PART-TIME ONLY X FULL- OR PART-TIME 7am - 2pm

When available for work? A.S.A.P. Working @ Olive Garden

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

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>Just in my</u>	<u>Country</u>	<u>12</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) 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>Textile Care Services</u>	Supervisor name _____	
Position <u>Sorter</u>	Employment dates	Pay or salary
Company <u>Suntone CO.</u>	From <u>July 2008</u>	Start <u>9.40</u>
Address <u>225 Wood Lake Drive SE</u>	To <u>April 2010</u>	Final <u>10.90</u>
<u>Rochester Mn 55904</u>	Your last job title _____	
Telephone <u>(507) 252 7500</u>		

Reason for leaving (be specific) Changed immigration status.

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

Sorting, blanket, sheet, and many different kind of closth. to be cleaned and cared. all this stuff come from. Mayo Clinic, methodist hospital and Hotels like: Doble Tree etc.

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.