

CORPORATE MANAGEMENT GROUP

Employment Application

Office Hours: 9am-4pm Mon-Thur, 9am-3pm Fri

Office Number: 507-923-4955

Office Address: 3707 Commercial Dr. SW Rochester, MN 55902



Applicant Information

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

Please fully complete pages 1-3

Full Name: (Last Name, First Name) TANKHAMVANG PAMELA Date: 03/21/2022
 Address: (Street Address) 1839 33RD ST NW (Apt./Unit #) _____
 (City) ROCHESTER (State) MN (ZIP Code) 55901
 Phone: (507) 254-1939 Email: Pamela.tankhamvang@yahoo.com
 Social Security No. 471-96-6382 Date Available: Anytime
 Position Applied for: Production Desired Salary: 15
 Shift Available to work: ___ 1st ___ (2nd) ___ 3rd Employment desired: Full-Time ___ Part-Time 2W
 Are you authorized to work in the U.S? Yes ___ No
 How did you hear about us? Spouse Referral Name: VINCENT TANKHAMVANG
 If under 18, please list age: _____

Do you have responsibilities or commitments that will prevent you from meeting specified work schedules? No ___ Yes

Education				
Type of School	Name of School	Location (Complete Mailing Address)	Number of Years Completed	Major & Degree
High School	John Marshall	Rochester MN	Graduated 1989	Diploma
College	RCTC		1	No
Bus. Or Trade School				
Professional School				

CORPORATE MANAGEMENT GROUP



Employment Application

Office Hours: 9am-4pm Mon-Thur, 9am-3pm Fri

Office Number: 507-923-4955

Office Address: 3707 Commercial Dr. SW Rochester, MN 55902

Previous Employment

Company: NRT Electronic Phone: Unavailable

Address: 2535 Hwy 14 West Suite Supervisor: Pam Cloutier

Job Title: Production Starting Salary: \$ 12 Ending Salary: \$ 13.5

Responsibilities: performed wire stripping, wire cutting and weld together to Build harnesses

From: 2016 To: 2021 Reason for Leaving: Company Moved

May we contact your previous supervisor for reference? Yes No

Previous Employment

Company: Bard Medical Phone: Unavailable

Address: Bard Medical Stuartville Supervisor: Andry Dejardin

Job Title: Production Starting Salary: \$ 10 Ending Salary: \$ 14.5

Responsibilities: inspected catheter to ensure that are reach an official standard.

From: 2016 To: 2016 Reason for Leaving: Company Moved

May we contact your previous supervisor for reference? Yes No

Previous Employment

Company: Rochester Meat Company Phone: (507) 299-0701

Address: 1025 7th St NW Supervisor: _____

Job Title: Production Starting Salary: \$ 10 Ending Salary: \$ 15

Responsibilities: Packed Animals

From: 1996 To: 2006 Reason for Leaving: Quit for other job

May we contact your previous supervisor for reference? Yes No

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for reference? Yes No

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: Pamela Thompson Date: 03/21/2022

CORPORATE MANAGEMENT GROUP

Employment Application

Office Hours: 9am-4pm Mon-Thur, 9am-3pm Fri

Office Number: 507-923-4955

Office Address: 3707 Commercial Dr. SW Rochester, MN 55902



PLEASE READ CAREFULLY APPLICATION FORM WAIVER

In exchange for the consideration of my job application by Corporate Management Group, Inc.,

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 of Corporate Management Group, Inc. (CMG), 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 an officer of CMG. Both the undersigned and CMG may end the employment relationship at any time, without specified notice or reason. If employed, I understand that CMG 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 will result in my disqualification from consideration for employment or, if discovered after I begin employment, will result in my termination. I hereby give CMG permission to contact schools, all previous employers (unless otherwise indicated), references and others and hereby release CMG from any liability as a result of such contact.

I understand that a comprehensive background check may be conducted to determine my eligibility for hire by CMG. This may include but is not limited to, investigations of criminal and/or conviction records, driving records and/or a drug screen test as required by clients, government regulations or by CMG policies.

I release CMG and other persons or entities from any claims that might be based on CMG's decision to conduct a background check.

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

Signature of applicant Pawola Tanthomvang Date: 03/21/2022



MINNESOTA

DRIVER'S
LICENSE



1 TANKHAMVANG
2 PAMELA PHANH
8 1839 33RD ST NW
ROCHESTER, MN 55901-0561

4d DL# A881-048-168-417 4a ISS 04/23/2021
3f DOB 07/25/1969 4b EXP 07/25/2025
9 CLASS D 9a END NONE
12 RESTR NONE

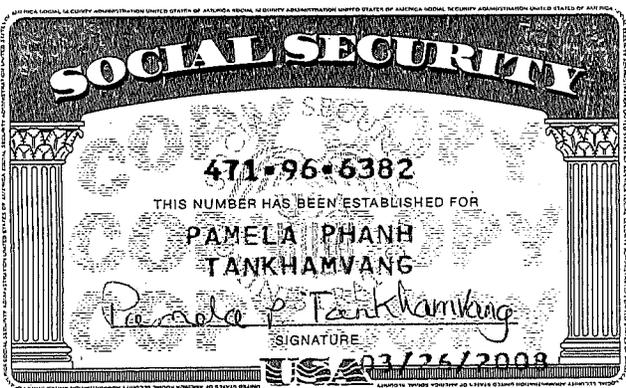
Minnesota

15 SEX F 17 WGT 110 lb
16 HGT 5'-00" 18 EYES BRO

Pamela Phan

5E DD 00000004519033

07/25/69



PAMELA THANKHAMVANG

CONTACT



507-254-1939



pamelathankhamvang@yahoo.com

OBJECTIVE

I am interested in working with a team that is passionate about the work that they provide. I would like to enhance my knowledge, skills, and ability in the workforce. I would be honored to be apart of your company.

SKILLS

- TEAM PLAYER
- HONEST
- ATTENTIVE
- STRONG WORK ETHIC
- POSTIVE ATTITUDE

EXPERIENCE

NRI Electronic Inc – Production

March 2016 – October 2021
Rochester, MN

- Performed wire stripping, wire cutting, and welding to assemble harnesses.
- Followed company protocol and standards for assemble of product.

C.R. Bard – Lead Senior Operation

2006-2016
Stewartville, MN

- Lead intermittent Production department focusing on efficient workflow
- Coordinate daily job duties for shift ensuring that all product steps are followed and completed on schedule
- Train all new line workers on company standard practices

Rochester, MN – Quality Assurance

1996-2006
Rochester, MN

- Promoted from line production position to lab technician that led to quality assurance specialist
- Analyzed meat product to ensure safety through testing of contagions such as E. coli
- Cooked food product to test for quality

Golden Living Center – Nursing Assistant

1995-1996
Rochester, MN

- Assisted residents with activities of daily living.

EDUCATION

John Marshall High School

Graduated 1989

High School Diploma

Rochester Community and Technical College

1995-1996

Nursing Assistant Certification



New Employee Acknowledgement Form

Welcome to CMG and Reichel Foods!

As a new employee, you will be provided with the website, username and password to view the new hire forms that you signed during your CMG interview. Please sign and date the bottom of the sheet stating that you received your login information.

CMG/ ESSG / Reichel Foods Handbook

Healthcare Notice of Exchange and Website for Enrollment

Safety Policy

Drug and Alcohol Testing Policy

View Paystubs

Website: <https://zenople.esgazure.com/login/cmg>

** do not fill out the below login name and password, CMG will provide you with this information **

Login Name: 6072541939

Login Password: Pt@ 6882

I hereby acknowledge that I have been provided with the login information to view the items listed above. I understand that it is my responsibility to read and follow each document provided to me and that if I have any questions concerning the times or its content, that it is my responsibility to address my questions with my supervisor or CMG representative, and hereby waive any claim, now or in the future, that I did not receive, did not read or did not comprehend the items or their contents.

Signature: David A. Tanaka **Date:** 03/21/2022



CMG/Reichel Foods, Inc. \$2,000.00 Retention Bonus

Thank you for accepting a position with CMG and Reichel Foods, Inc. By accepting this position, you are eligible for a \$2,000 Retention Bonus. Please read the below requirements and conditions about the sign-on bonus followed by your signature.

Requirements and Conditions for the \$2,000 Retention Bonus

- You must pass all Reichel Foods, Inc. hiring requirements before you are eligible for hire
 - o You must complete the CMG/Reichel Foods, Inc. orientation
 - o You must pass a drug screen and background check
 - o You must meet Reichel Foods, Inc. language requirements
 - o You must meet company policies and practices for attendance and performance
- If you resign or your assignment ends, you will forfeit any remaining portion of the Retention Bonus.
- The bonus amount is for \$2,000 total
 - o You will receive weekly payments of \$41.67 for 12 weeks (totaling \$500)
 - o After which, you will receive a \$500 check from CMG after each quarter worked (i.e. 13 weeks) for the following 3 quarters. This totals \$1,500.
- Payroll taxes (including State & Federal Income Taxes) will not be withheld from your \$500 checks that are provided by CMG. You will be responsible for the tax liability when you file your individual income tax returns.
- You will receive a 1099 for payments from CMG for any tax year you were paid the bonus.

**I acknowledge that I have read and understand the terms and conditions above regarding the \$2,000 Retention Bonus with CMG and Reichel Foods, Inc.*

Employee Name

Signature

Date

PAMEIA TANKHANVONG

Pameia Tankhanvong

03/21/2022

CMG Representative Name

CMG Representative Signature

Date

Kelly M. Sutton

[Signature]

3-21-2020

CMG Preliminary Questions

Name: PAMELA TAN KHAMVANG

Date: 03/21/2022



Please Mark Yes or No

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

Please Mark Your Preferred Position

4. Which plant do you prefer? South North
5. What shift to you prefer? 1st 2nd 3rd

To be completed during or after interview

Have you ever been convicted of a crime? Yes No

Explain

Incident _____

Employee Signature PAMELA TAN KHAMVANG

Interviewer Signature KELLY M. SUTHER

Name: PAMELA TANRANKANAN

Date: 03/21/2022

Achoo!

****Read the story and answer the multiple-choice questions below ****

Achoo! We all sneeze sometimes. Sneezing is a reflex that your body does automatically. That means you cannot make yourself sneeze or stop one once it has started. When you sneeze, your body is trying to get rid of bad things in your nose, such as bacteria. You have extra germs when you have a cold, so you sneeze a lot more. You might also sneeze when you smell pepper!

Inside your nose, there are hundreds of tiny hairs. These hairs filter the air you breathe. Sometimes dust and pollen find their way through these hairs and bother your nasal passages. The nerves in the lining of your nose tell your brain that something is invading your body.

Your brain, lungs, nose, mouth and the muscles of your upper body work together to blow away the invaders with a sneeze. When you sneeze, germs from your nose get blown into the air. Using a tissue or "sneezing into your sleeve" captures most of these germs. It is very important to wash your hands after your sneeze into them, especially during cold and flu season.

Do you ever sneeze when you walk into bright sunlight? Some people say that happens to them often. Scientists believe the UV rays of the sun irritate the nose lining of these people, so they sneeze.

If someone nearby sneezes, remember to tell them "Gesundheit!" that is a funny-looking word which is pronounced "gezz-oont-hite." It is the German word that wishes someone good health after sneezing.

1. Why do people sneeze?
 - a. The tiny hairs in your nose tickle
 - b. Your body is trying to get rid of bad things
 - c. You can make yourself sneeze when you want to
2. What are the 3 parts of your body that work together with your upper body to sneeze?
 - a. Hand, Elbow, Shoulder
 - b. Ankle, Knee, Hip
 - c. Brain, Lungs, Mouth
3. What other things can make you sneeze?
 - a. Pepper, Sun, Dust, and Pollen
 - b. Water, Pop, Flowers, Trees
 - c. Salt, Seasonings, Meat, Fruit
4. What is a German word that people often say to someone that sneezes?
 - a. Good Job
 - b. Gesundheit
 - c. Hang in there
5. What should you do after your sneeze into your hands especially during cold and flu season? (This should also be done in the production area!)
 - a. Wipe them with a tissue
 - b. Nothing
 - c. Wash your hands

Authorization to Enter New Hire Information

By signing below, I authorize a member of Corporate Management Group – Rochester Office – to enter my new hire paperwork into the online Zenople (NHO) site. I understand that I will be provided access via login name and password to view the forms that they have completed on my behalf.

Employee Signature: Pamela Tanthamvong Date: 03/21/2022

Insurance Information

I understand that the CMG Staff defaults to decline insurance when entering my new hire paperwork unless specified otherwise during my interview.

I understand that I have 30 days after my employment starts to apply for insurance through ESSG via the login information provided to me.

I agree: PT (initial)

Electronic W-2 Consent:

The IRS has approved employers to send W-2 electronically to employees. Employees who choose to receive their W-2 statements electronically will have the following advantages. Faster access to your W-2. Ongoing availability to view the W-2. Ability to reprint as many times as needed.

Would you like to receive your W-2 statement electronically?

Yes No

By completing the box below, you are consenting to receive your W-2 by email to only the email address that you list. A paper copy will **not** be provided. This option can be changed at any time but remains in effect until you inform ESSG that you would like to revoke your consent.

I consent to receive my W-2 by email at the address listed below from this date forward.

Email

Pamela.Tanthamvong@Yahoo.Com

I agree: PT (initial)

Applicant Certification and Authorization for Background Check

Please read the below statements and initial on the indicated line

(This information will be inputted onto the online NHO form – you will be provided the login information during your interview)

I authorize Employer Solutions Staffing Group (ESSG) to use the information and statements contained in this application to determine my qualifications. I authorize ESSG to make inquiries of my former employers, except as indicated in this application, regarding my previous duties, responsibilities, performance, compensation and eligibility for rehire.

I understand that comprehensive background checks may be conducted to determine my eligibility for my hire by certain clients of ESSG. This may include – but is not limited to, investigations of criminal and/or conviction records, driving records and/or a drug screen test as required by clients, government regulations or by ESSG policies.

I release ESSG and other persons or entities from any claims that might be based on ESSG's decision to conduct a background check. I certify that all statements made in my application are true and accurate and that I have not omitted any material information or provided false or misleading information. I understand that any material omission or misrepresentation will result in my disqualification from consideration for employment or if discovered after I begin my employment, will result in my termination.

If hired, I agree to abide by the policies and procedures of ESSG.

I have read and agree AS (initial)

I hereby authorize Employer Solutions Staffing Group, LLC and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment purposes. I understand that the scope of the consumer report / investigative consumer report may include, but is not limited to the following areas: verification of social security number, credit reports, current and previous residences, employment history, education background, character references, drug testing, civil and criminal history records from any criminal justice agency in any or all federal, state, country jurisdictions, driving records, birth records, and any other public records.

I further authorize any individual, company, firm, corporation or public agency to divulge any and all information, verbal or written, pertaining to me, to Employer Solutions Staffing Group, LLC or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation or public agency may have to include information or data received from other sources Employer Solutions Staffing Group, LLC and its designated agents and representatives shall maintain all information received from this authorization in a confidential manner in order to protect the applicants personal information, including, but not limited to, addresses, social security numbers and dates of birth.

I have read and agree PT (initial)

