



CMG APPLICATION FOR EMPLOYMENT

ent 2/19

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

PLEASE COMPLETE PAGES 1-5		DATE <u>2-19-14</u>
Name <u>DUQUE RAYMOND T</u>		
<small>Last First Middle Maiden</small>		
Present address <u>1541 2nd AVE NE #4</u>		
<small>Number Street</small>	<small>City</small>	<small>State</small>
<u>Rochester</u>	<u>M.N.</u>	<u>55906</u>
<small>City State Zip</small>		
Social Security No. _____ - _____ - _____		
Telephone <u>(507) 250-7934</u>	E-Mail _____	
If under 18, please list age <u>31</u>	Referred by <u>GABRIEL TORRES</u>	
Position applied for (1) <u>Fork lift</u>	Shift available to work	
and salary desired (2) <u>\$9.00</u>	1 st _____	
(Be specific)	2 nd <input checked="" type="checkbox"/> _____	
	3 rd _____	
How many hours can you work weekly? <u>35-40</u>	Can you work nights? <u>yes</u>	
Employment desired <input checked="" type="checkbox"/> FULL-TIME ONLY <input type="checkbox"/> PART-TIME ONLY <input type="checkbox"/> FULL- OR PART-TIME		
When available for work? <u>2-24-14</u>		
Do you have responsibilities or commitments that will prevent you from meeting specified work schedules?		
<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If so, please explain <u>Report to P.O. 3 Go to class on Wednesday</u>		
Do you anticipate any absences from work on a regular basis?		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If so, please explain _____		

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School	<u>9</u>			
College	<u>process of Getting GED school Hawthorn</u>			
Bus. or Trade School				
Professional School				

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DO YOU HAVE A DRIVER'S LICENSE? ___ Yes No

What is your means of transportation to work? Being drop off & picked up

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 Abdul Kadab Name Joe Ramos

Position Sales Position H.R. Supervisor

Company _____ Company Lake Side

Address _____ Address _____

Telephone (507) 322-8270 Telephone (507) 990-4254

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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>K W Buildman</u>	Supervisor name <u>Steve</u>	
Position _____	Employment dates	Pay or salary
Company _____	From <u>8-12-10</u>	Start <u>9.00</u>
Address _____	To <u>10-16-10</u>	Final <u>11.00</u>
Telephone <u>(507) 280-6727</u>	Your last job title <u>Roofer</u>	
Reason for leaving (be specific) <u>Went To prison</u>		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. <u>Work with the crew colaberate help each other Get the Job done. Tear the Roof off THEN Cover Roof with materials</u>		

Name <u>Hirshfield Steel</u>	Supervisor name <u>DAVID S.</u>	
Position _____	Employment dates	Pay or salary
Company _____	From <u>08</u>	Start <u>9.00</u>
Address _____	To <u>10</u>	Final <u>12.00</u>
Telephone (____) _____	Your last job title <u>fork lift operator</u>	
Reason for leaving (be specific) <u>moved To m.n.</u>		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. <u>load & unload Trucks Shipping & Receiving Help other co-workers with welding</u>		

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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>LAke Side Foods</u>	Supervisor name <u>Joe Ramos</u>	
Position <u>Production Line</u>	Employment dates	Pay or salary
Company _____	From <u>07</u>	Start <u>\$9.00</u>
Address _____	To <u>08</u>	Final <u>\$9.00</u>
Telephone (____) _____	Your last job title _____	

Reason for leaving (be specific) Seasonal

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. help coworkers on production line Paletize lift heavy boxes or sanitize the unit using pressure washer hoses

Name <u>Elain Apple orcharder</u>	Supervisor name <u>Julie</u>	
Position <u>palitizer</u>	Employment dates	Pay or salary
Company _____	From <u>\$8.75</u>	Start <u>07</u>
Address _____	To <u>\$8.75</u>	Final <u>08</u>
Telephone (____) _____	Your last job title <u>Forklift operator</u>	

Reason for leaving (be specific) Seasonal

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company. help co-worker as a team work on assembly line Print stickers Patitize

May we contact your present employer? Yes ___ No

Did you complete this application yourself Yes ___ No

If not, who did? _____

**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.

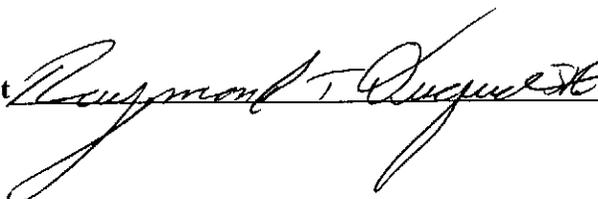
I understand that a comprehensive background check may be conducted to determine my eligibility for hire by CMG. This may include but is not limited to, investigations of criminal and/or conviction records, driving records and/or a drug screen test as required by clients, government regulations or by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

 Date: 2-19-14