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ENTERED

CMG APPLICATION FOR EMPLOYMENT

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

PLEASE COMPLETE PAGES 1-5 DATE 9/4/13

Name Abdullahi H SALAH
Last First Middle Maiden

Present address 1505 MARION ROSE #305
Number Street
Rochester MN 55904
City State Zip

Social Security No. 471 - 47 - 1252

Telephone (507) 271.3487 E-Mail Abdullahi70@hotmail

If under 18, please list age _____ Referred by _____

Position applied for (1) Production Line Shift available to work
 and salary desired (2) 9.00 1st _____
 (Be specific) 2nd _____
 3rd _____

How many hours can you work weekly? 40/50 Can you work nights? yes

Employment desired FULL-TIME ONLY PART-TIME ONLY FULL- OR PART-TIME

When available for work? SOON

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	^{high} MAYRICK SCHOOL	Rochester	Diploma	
College				
Bus. or Trade School				
Professional School				

* 6/2012
 CMG time states can't work w/ part
 Revised February 2012

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? _____

Driver's license number X404265917108 State of issue MN

Operator Commercial (CDL) Chauffeur

Expiration date 01-01-2015

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 ABDI RISAQ SHIDANE Name _____

Position _____ Position _____

Company C M-G Company _____

Address _____ Address _____

Telephone (507) 202 9331 Telephone () _____

APPLICATION FOR EMPLOYMENT

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>PEARSON</u>		Supervisor name <u>Andy</u>	
Position <u>Machine Operator</u>		Employment dates	Pay or salary
Company <u>INC</u>		From <u>09</u>	Start <u>9.50</u>
Address <u>9200 Earthline Southwest Cedar Rapids, IA 52404</u>		To <u>2011</u>	Final <u>10</u>
Telephone <u>(319) 841 4700</u>		Your last job title _____	
Reason for leaving (be specific) <u>I move back to Rochester</u>			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. <u>I have good experience production lines and Backlog inspection and etc</u>			

Name <u>MANPOWER</u>		Supervisor name _____	
Position <u>assembly</u>		Employment dates	Pay or salary <u>8-</u>
Company <u>IBM</u>		From <u>2005</u>	Start <u>8.50</u>
Address <u>3443 22nd AVE NW Rochester MN 55901</u>		To <u>2009</u>	Final <u>9.50</u>
Telephone <u>(507) 285-0710</u>		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. <u>I am had work and I use to work IA- General meals I know how to work hard, if u need Machine operator I'm ready.</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>Rochester Medical</u> Position <u>Machanic Operator</u> Company <u>Rochester Medical</u> Address <u>one Rochester Medical drive</u> <u>Stewartville, Mn. 55976</u> Telephone <u>(507) 5339645</u>	Supervisor name <u>Andy DeJardin</u>	
	Employment dates	Pay or salary
	From <u>2011</u>	Start <u>8-50</u>
	To <u>2013</u>	Final <u>8-50</u>
Your last job title _____		
Reason for leaving (be specific) <u>Not enough money</u>		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company.		

Name _____ Position _____ Company _____ Address _____ Telephone (____) _____	Supervisor name _____	
	Employment dates	Pay or salary
	From _____	Start _____
	To _____	Final _____
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? _____

**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.

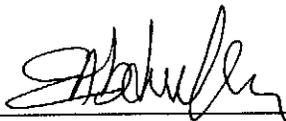
I understand that a comprehensive background check may be conducted to determine my eligibility for hire by CMG. This may include but is not limited to, investigations of criminal and/or conviction records, driving records and/or a drug screen test as required by clients, government regulations or by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

09/04/13