

2008 - 2009 Felony

got out Nov 2.



1/1am (addon)
Orientation.

CMG APPLICATION FOR EMPLOYMENT

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

PLEASE COMPLETE PAGES 1-5

DATE 3 FEB 15 12:00

Name Sellner Jeffrey Allen
Last First Middle Maiden

Present address 1280 Hastings Ave
Number Street
Newport MA 55055
City State Zip

Social Security No. 470 - 84 - 1672

Telephone (612) 254-4174

E-Mail Sellnerjdsmatrix@gmail.com

If under 18, please list age _____

Referred by Workforce Center C6 one

Position applied for (1) general labor
and salary desired (2) open
(Be specific)

Shift available to work
1st _____
2nd X
3rd X
2nd - 3rd - Ck - open \$ pay rate

How many hours can you work weekly? _____ Can you work nights? _____

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

When available for work? ASAP

Do you have responsibilities or commitments that will prevent you from meeting specified work schedules?
___ No X Yes If so, please explain Treatment Fridays 9am - Noon

Do you anticipate any absences from work on a regular basis?
X 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>Woodbury Sr High</u>	<u>Woodbury, MN</u>	<u>5</u>	<u>G.E.D.</u>
College	<u>N/A</u>			
Bus. or Trade School	<u>N/A</u>			
Professional School	<u>N/A</u>			

APPLICATION FOR EMPLOYMENT

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

What is your means of transportation to work? Car

Driver's license number F326077632311 State of issue MN

Operator ___ Commercial (CDL) ___ Chauffeur ___

Expiration date 05-02-2017

Have you had any accidents during the past three years? Yes ___ No

If so, how many? 1

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 Carter Swift Name Dave Black

Position Clergy Position Friend

Company 3M Company Honeywell

Address 6450 Kirkwood Avenue Address 2552 Eagle Trace Ln

Cottage Grove MN Woodbury MN 55129

Telephone (651) 343 2662 Telephone (651) 260 0289

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 N/A Specialty N/A

Date Entered N/A Discharge Date N/A

*Kitchen
Food service
in prison
vast majority
of st. c. convicts
being off
Cinola
Migose
attend there
Cook prep fake*

WORK EXPERIENCE 1991-2008

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>N/A</u> 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.		

Name <u>N/A</u> 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.		

APPLICATION FOR EMPLOYMENT

WORK EXPERIENCE 1991-2008

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>N/A</u> 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.

Name <u>N/A</u> 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: 3 FEB 15 12:10