



(12.50/hr)  
(12/hr)  
(1st & 2nd)

**CMG APPLICATION FOR EMPLOYMENT**

Soon as possible

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

PLEASE COMPLETE PAGES 1-5 DATE 11, 2, 17

Name Sahila Latifi Sahila  
Last First Middle Maiden

Present address 5808 E 113 Cir  
Number Street  
Norman CO 80233  
City State Zip

Social Security No. 571-91-6234

Telephone 303 748-1267 E-Mail Sahilalatifia@outlook.com

If under 18, please list age \_\_\_\_\_ Referred by \_\_\_\_\_

Position applied for (1) \_\_\_\_\_ Shift available to work  
 and salary desired (2) 1460 15.00  1st \_\_\_\_\_  
 (Be specific)  2nd \_\_\_\_\_  
 3rd \_\_\_\_\_

How many hours can you work weekly? 35 to 40 Can you work nights? NO

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

When available for work? 11/3/17

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	Aishdarini	Orter	4 YRS 6-12	<del>Teacher</del>
College	Derlmalmax	Orter	4 YRS	Teacher
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), dates of conviction(s), sentence(s) imposed, and type(s) of rehabilitation. \_\_\_\_\_

### APPLICATION FOR EMPLOYMENT

DO YOU HAVE A DRIVER'S LICENSE?  Yes  No

What is your means of transportation to work? I have car

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 \_\_\_\_\_ Name \_\_\_\_\_

Position \_\_\_\_\_ Position \_\_\_\_\_

Company \_\_\_\_\_ Company \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_ 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><del>Rigel</del></u> Position <u>cashier</u> Company <u>Rigel Sabon</u> Address <u>westminster mall</u> Telephone ( ) _____	Supervisor name <u>Londa</u> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">Employment dates</th> <th style="width: 50%;">Pay or salary</th> </tr> <tr> <td>From _____</td> <td>Start _____</td> </tr> <tr> <td>To _____</td> <td>Final _____</td> </tr> <tr> <td colspan="2">Your last job title _____</td> </tr> </table>	Employment dates	Pay or salary	From _____	Start _____	To _____	Final _____	Your last job title _____	
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>Fantastic Beauty Sabon</u> Position <u>owner</u> Company _____ Address <u>3890 Kipling St</u> Telephone <u>(303) 748 1262</u>	Supervisor name _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">Employment dates</th> <th style="width: 50%;">Pay or salary</th> </tr> <tr> <td>From <u>2009</u></td> <td>Start _____</td> </tr> <tr> <td>To <u>2016</u></td> <td>Final _____</td> </tr> <tr> <td colspan="2">Your last job title _____</td> </tr> </table>	Employment dates	Pay or salary	From <u>2009</u>	Start _____	To <u>2016</u>	Final _____	Your last job title _____	
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From <u>2009</u>	Start _____								
To <u>2016</u>	Final _____								
Your last job title _____									

Reason for leaving (be specific) Stores closed my shop

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

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May we contact your present employer?  Yes  No

Did you complete this application yourself  Yes  No

If not, who did? \_\_\_\_\_