

| TYPE OF SCHOOL       | NAME OF SCHOOL        | LOCATION (complete mailing address) | NUMBER OF YEARS COMPLETED | MAJOR & DEGREE |
|----------------------|-----------------------|-------------------------------------|---------------------------|----------------|
| High School          | Spillo                | St. Cloud                           | 4                         | H.S. diploma   |
| College              | University of Phoenix |                                     |                           |                |
| Bus. or Trade School |                       |                                     |                           |                |
| Professional School  |                       |                                     |                           |                |

**PLEASE COMPLETE PAGES 1-5**

Name: Terri J Asmore Alonia

Last First Middle Maiden

Present address: 1212 Washington Memorial Drive  
St. Cloud MN 56304  
 Number Street City State zip

Social Security No. 322-86-0487  
 Telephone (US) 322-3906 (Toll-free) OK

E-Mail Alonia09@gmail.com

Referred by \_\_\_\_\_

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

Position applied for (1) \_\_\_\_\_  
 and salary desired (2) \_\_\_\_\_  
 (Be specific)

Shift available to work  
 1st open  
 2nd open  
 3rd prefer a night

How many hours can you work weekly? 40  
 Can you work nights? \_\_\_\_\_

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

When available for work? \_\_\_\_\_

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 \_\_\_\_\_

DATE 11-12-14

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

**CMG APPLICATION FOR EMPLOYMENT**



APPLICATION FOR EMPLOYMENT

DO YOU HAVE A DRIVER'S LICENSE?  Yes  No

What is your means of transportation to work? Drive

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 Chelayae Woodard Juanita Gordon

Position General Producer

Company Chippie Shoppes

Address 5th Street MN

Telephone (612) 275-1442 (329) 296-0909

APPLICATION FOR EMPLOYMENT

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

assembly line, packing

Reason for leaving (be specific) Higher wages sought

Name Atlas Steaks  
 Position temp  
 Company Robins Bakery  
 Address \_\_\_\_\_  
 Telephone ( ) \_\_\_\_\_

|                           |                     |
|---------------------------|---------------------|
| Your last job title _____ |                     |
| From <u>June 08</u>       | To <u>August 10</u> |
| Start <u>8:30</u>         | Final <u>4:30</u>   |
| Employment dates          | Pay or salary _____ |
| Supervisor name _____     |                     |

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

pushed fridges, assembly line, clean

Reason for leaving (be specific) Moved addresses

Name Erica Jones  
 Position production  
 Company \_\_\_\_\_  
 Address \_\_\_\_\_  
 Telephone ( ) 202-52-1313

|                              |                     |
|------------------------------|---------------------|
| Your last job title _____    |                     |
| From <u>April 14</u>         | To <u>Oct 14</u>    |
| Start <u>11:59</u>           | Final <u>4:30</u>   |
| Employment dates             | Pay or salary _____ |
| Supervisor name <u>Scott</u> |                     |

**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.

**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 \_\_\_\_\_

APPLICATION FOR EMPLOYMENT

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.

|  |  |                    |          |                  |              |
|--|--|--------------------|----------|------------------|--------------|
| Supervisor name  |  | _____              |          | Name             | Burger King  |
| Employment dates   |  | From               | 11-57-57 | Position         | _____        |
| Pay or salary  |  | Start              | 7.50     | Company          | _____        |
|  |  | To                 | 9-4-09   | Address          | _____        |
|  |  | Final              | 7.75     | Telephone (____) | 329 253-4140 |
| Your last job title  |  | Higher wage seeker |          |                  |              |
| 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. |  |                    |          |                  |              |

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

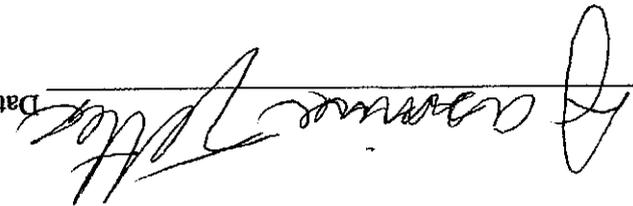
I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts will result in my disqualification from consideration for employment or, if discovered after I begin employment, will result in my termination. I hereby give CMG permission 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: 11-2-14