

*Outfold  
to Kelsey/OKS*



*MON 4/1 2:00 - Interview.*

*3/17 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 \_\_\_\_\_

Name White Trevor Raymond III  
Last First Middle Maiden

Present address 124 West front St Apt. 17  
Number Street  
Claremont MN 55924  
City State Zip

Social Security No. 323-82-9681

Telephone 612 240-4954 E-Mail \_\_\_\_\_

If under 18, please list age \_\_\_\_\_ Referred by Arlene B. White\*

Position applied for (1) line Shift available to work  
 and salary desired (2) 9.50  
 (Be specific) 1st (5) 40 40  
 How many hours can you work weekly? Can you work nights? no

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

When available for work? Open

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	<u>Carliss High</u>	<u>Chicago, IL</u>	<u>3</u>	
College				
Bus. or Trade School				
Professional School				

*507-990-*

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. Will explain if needed

*age* 21-pulled over police - paroled, pulled over + felony →

**APPLICATION FOR EMPLOYMENT**

DO YOU HAVE A DRIVER'S LICENSE? \_\_\_ Yes /  No

What is your means of transportation to work? Sister work first Shift so she will

Driver's license number \_\_\_\_\_ State of issue \_\_\_\_\_ Drive me!

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 Angela Lewis Name Tianna

Position friend Position friend

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

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

Telephone (612)-272-1518 Telephone (612) 616-7935

**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>White Castle</u>	Supervisor name _____	
Position <u>Crew</u>	Employment dates	Pay or salary
Company _____	From <u>9/12</u>	Start <u>7.25</u>
Address <u>9600 Lyndale Ave</u>	To <u>2/13</u>	Final <u>7.25</u>
<u>Minneapolis, MN 55424</u>	Your last job title _____	
Telephone <u>(952) 881-3034</u>		

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.

Close or Open Store, Take Orders  
and Cashier, Customer Service

Name _____	Supervisor name _____	
Position _____	Employment dates	Pay or salary
Company _____	From _____	Start _____
Address _____	To _____	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.

**APPLICATION FOR EMPLOYMENT**

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Name _____ Position _____ Company _____ Address _____ Telephone (____) _____	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 _____</td> <td>Start _____</td> </tr> <tr> <td>To _____</td> <td>Final _____</td> </tr> </table> Your last job title _____	Employment dates	Pay or salary	From _____	Start _____	To _____	Final _____
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To _____	Final _____						
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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

Juan R. White

Date: 03/19/13



## RICK & ROSE

Rick and Rose were good friends. They worked together at Reichel Foods.

One day they had a lot of work, and not enough employees, this same day the supervisor asked Rick to pack carrots and ranch in 100 boxes. Rick was worried he could not finish this before the day ended. He was going to ask Rose for help but he noticed she was gone. He knew if she didn't help, the boxes would not get packed on time.

The supervisor saw Rick working very hard and went to ask Rose for help. He looked for her in the cafeteria. When he saw her taking a break, he asked her why she wasn't helping Rick. "I didn't know that he needed help," said Rose, "I will go help him right away."

When Rick saw Rose coming to help he felt happy and supported. "Please don't be afraid to ask me to help. We are good friends and co-workers," she said, "and together we make a great team."

1. Who are Rick and Rose?
  - a. Co-workers
  - b. Good friends
  - c. Both A & B
2. Rick and Rose work at Reichel Foods. True or false? (circle one)
  - a. True
  - b. False
3. Where did the supervisor find Rose?
  - a. Outside
  - b. Working on the line
  - c. In the cafeteria
  - d. In the bathroom
4. How did Rick feel when he saw Rose?
  - a. Mad
  - b. Sad
  - c. Happy
  - d. Confused
5. What lesson did Rick and Rose learn?
  - a. Teamwork
  - b. How to make carrots and ranch
  - c. Communication
  - d. Both A & C

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## Preliminary Questions

Name: Trevor

Date: 4/1

1. If hired, can we run a national background study? *y*
2. If hired are you willing to take a drug test? *y*
3. Are you able to work with soy, wheat, peanuts & milk? *y*
4. Are you able to work with pork? *y*
5. Which plant do you prefer? *S*
6. What shift to you prefer? *1st*

-If called for an interview please bring two forms of identification.

(Social security card, birth certificate, passport and license or permanent resident card)



# Applicant Interview Score Card

Name Trevor Date of Interview 4/1

Position/Shift Assignment 1683 Stand-by Position not applicable

Rating Weak (1) to Strong (5)

- |   |           |   |
|---|-----------|---|
| 1. Understanding of English conversation  | 1 2 3 4 5 | 1. Understands English conversation   |
| 2. Speaks English Fluently  | 1 2 3 4 5 | 2. Speaks English Fluently  |
| 3. Work experience related to job-food industry   | 1 2 3 4 5 | 3. Work experience related to job-food industry   |
| 4. Work history-working presently, yrs in workforce   | 1 2 3 4 5 | 4. Work history-working presently, yrs in workforce   |
| 5. Criminal Background information  | 1 2 3 4 5 | 5. Criminal Background information  |
| 6. Possesses required New Hire documentation (I9)   | 1 2 3 4 5 | 6. Possesses required New Hire documentation (I9)   |
| 7. Personality-friendly, pleasant, sense of humor   | 1 2 3 4 5 | 7. Personality-friendly, pleasant, sense of humor   |
| 8. Appearance-well groomed, cleanliness   | 1 2 3 4 5 | 8. Appearance-well groomed, cleanliness   |
| 9. Meets requirements to work w/pork, peanuts & soy   | 1 2 3 4 5 | 9. Meets requirements to work w/pork, peanuts & soy   |
| 10. Shift availability-prefers shift that is available for Open positions, willing to be flexible to shifts available | 1 2 3 4 5 | 10. Shift availability-prefers shift that is available for open positions, willing to be flexible to shifts available |

Total possible points **50** pts. Total points scored \_\_\_\_\_

Total possible points **50** pts. Total points scored \_\_\_\_\_

Former Employer Rating Bonus Points 1-20 \_\_\_\_\_

Interviewer: Kelsey  
Date: 4/1

Total Points \_\_\_\_\_

# TEST RESULTS RECORD

Test Reference Number \_\_\_\_\_ Name of Collector \_\_\_\_\_

## COMPANY INFORMATION

Company Name Reichel Foods Phone 923-4955 Fax \_\_\_\_\_  
 Address 3707 Commercial Dr SW City Rochester State/Province MN Zip/Postal Code 55903

## DONOR INFORMATION

Employee I.D. \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Type of Identification Provided:  Driver's License  Employee Photo I.D.  Other \_\_\_\_\_

Reason for test:  Pre-employment  Random  Reasonable cause  Post-accident  Other \_\_\_\_\_

## CERTIFICATION

I hereby certify that the specimen provided is my own and has not been substituted or adulterated. I further agree and grant permission for the testing of my specimen for drug metabolites and alcohol.

Donor signature \_\_\_\_\_ Date / Time \_\_\_\_\_

I hereby certify that I collected the specimen provided by the aforementioned Donor and that it was not substituted or adulterated to the best of my knowledge.

Julay Adkail \_\_\_\_\_ Date / Time \_\_\_\_\_

Collector signature N/A Date / Time N/A

Laboratory signature \_\_\_\_\_ Date / Time received \_\_\_\_\_

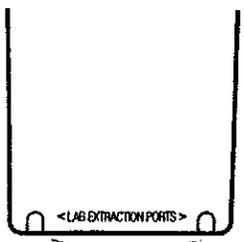
## TEST RESULTS

Date/Time Collected \_\_\_\_\_

Time Interpreted \_\_\_\_\_

NOTE: Lab personnel obtain specimen samples by puncturing the lab extraction ports on the side of device with a needle and syringe and drawing out the sample.

### Side of Device



Lab extraction ports

Cut out this panel to copy/scan results

Drug Name	Symbol	Negative	Positive	Not Tested
Alcohol	ALC	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Amphetamine	AMP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Buprenorphine	BUP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Benzodiazepine	BZO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cocaine	COC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EDDP	EDDP	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Marijuana	THC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Methadone	MTD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Methamphetamine	MET	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Opiates	OPI	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oxycodone	OXY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Phencyclidine	PCP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Notes / Comments \_\_\_\_\_

\_\_\_\_\_

# Background Investigation Information Release Form

Please read this form carefully and be aware that by allowing Employer Solutions Staffing Group LLC to investigate your background with state and federal agencies, you will be waiving and releasing all claims for damages you might sustain arising out of the criminal and driving record background check and review.

I understand that a successful criminal and driving record background investigation is a condition of my employment by Employer Solutions Staffing Group LLC to work at facilities of:

Reichel Foods

and, further, that Employer Solutions Staffing Group may, at its discretion, conduct periodic criminal and driving record background investigations on me during the course of my employment with Employer Solutions Staffing Group.

I agree to waive and relinquish all claims I may have against Employer Solutions Staffing Group LLC and its officers, agents, servants and employees as a result of my participation in any criminal and driving record background investigation.

I do hereby fully release and discharge Employer Solutions Staffing Group LLC, its respective officers, agents, servants, and employees from any and all claims from damages that I may have or that may accrue to me on account of the results of any aspect of any criminal and driving record background investigation.

I further agree to indemnify and hold harmless and defend Employer Solutions Staffing Group LLC, its respective officers, agents, servants, and employees from any and all claims resulting from damages sustained by me or arising out of, connected with, or in any way associated with, any of the activities of any criminal and driving record background investigation and review.

**I have read and fully understand this Waiver and Release of All Claims.**

323-82-9681 Social Security Number  
4708025366315 Driver's License No.  
MN State  
White Last Name  
Trevor First Name  
R M.I.  
Raumont Maiden and/or Other Last Names Used  
124 West front Apt 17 Dodge County Current Address City and County  
55924 State and Zip Code  
12-05-1988 Date of Birth  
Circle One:  
Male / Female

Signature: Trevor White Date: 3/1/13