



FAXED

SENSITIVE BUT UNCLASSIFIED

Department of Homeland Security
E-Verify

Report Prepared: 05/07/2010

Page: 1 of 1

Case Verification Number: 2010127153446ED

Initial Verification:

Last Name:	Padgett	First Name:	Tyrone
Middle Initial:		Maiden Name:	
Social Security Number:	133-68-8709	Date of Birth:	09/19/1984
Hire Date:	04/29/2010	Citizenship Status:	Citizen of the United States
Alien Number:		I-94 Number:	
Document Type:	List B, C Documents	Doc. Expiration Date:	
Initiated By:	ESAG6409	Initiated On:	05/07/2010

Initial Verification Results:

Initial Eligibility: EMPLOYMENT AUTHORIZED

SSA Referral:

Referral By: Referral Date:

Verification Response:

Eligibility: Response Date:

SSA Resubmittal:

Last Name:		First Name:	
Middle Initial:		Maiden Name:	
Social Security Number:		Date of Birth:	
Initiated By:		Initiated On:	

Resubmittal Verification Results:

Eligibility:

Additional Verification:

Comments:
Initiated By: Initiated On:

Verification Response:

Eligibility: Response Date:

DHS Referral:

Referral By: Referral Date:

DHS Referral Results:

Eligibility: Response Date:

Case Resolution:

Resolve Option:	Resolved Authorized	Resolved On:	05/07/2010
Resolved By:	ESAG6409		

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MINNESOTA
DRIVER'S LICENSE



TYRONE PADGETT
1618 MARION RD SE LOT 176
ROCHESTER, MN 55904

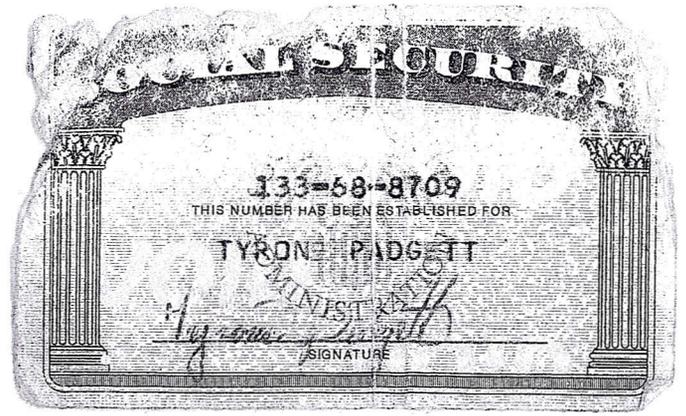
Date of Birth 09-19-1984
Sex Eyes Class
M BRN D
Height Weight
6-0 225 **DONOR**

ISSUED 06-2009 EXPIRES 09-19-2012

A581053086014



INDEXED





APPLICATION FOR EMPLOYMENT

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

PLEASE COMPLETE PAGES 1-5	DATE <u>4-28-10</u>
Name <u>Padgett Tyrone</u> <small>Last First Middle Maiden</small>	
Present address <u>1618 Marion RD</u> <u>Rochester</u> <u>MN</u> <u>55904</u> <small>Number Street City State Zip</small>	
How long <u>4 YRS</u> Social Security No. _____ - _____ - _____	
Telephone <u>(507) 206-0372</u>	
If under 18, please list age _____ Referred by <u>work force center</u>	
Position applied for (1) <u>OPEN</u> and salary desired (2) _____ <small>(Be specific)</small>	
Days/hours available to work No Pref <input checked="" type="checkbox"/> Thur <input checked="" type="checkbox"/> Mon <input checked="" type="checkbox"/> Fri <input checked="" type="checkbox"/> Tue <input checked="" type="checkbox"/> Sat <input checked="" type="checkbox"/> Wed <input checked="" type="checkbox"/> Sun <input checked="" type="checkbox"/>	
How many hours can you work weekly? <u>40+</u> Can you work nights? <u>yes</u>	
Employment desired <input type="checkbox"/> FULL-TIME ONLY <input type="checkbox"/> PART-TIME ONLY <input checked="" type="checkbox"/> FULL- OR PART-TIME	
When available for work? <u>ASAP</u>	
Do you have responsibilities or commitments that will prevent you from meeting specified work schedules? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If so, please explain _____	
Do you anticipate any absences from work on a regular basis? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If so, please explain _____	

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School	<u>John F Kennedy</u>	<u>BRONX NY</u>	<u>4</u>	
College				
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) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. _____

APPLICATION FOR EMPLOYMENT

MILITARY

HAVE YOU EVER BEEN IN THE ARMED FORCES? __ Yes No

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD? __ Yes No

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>Schmidt Printing</u>	Supervisor name <u>MARK</u>	
Position <u>Machine operator</u>	Employment dates	Pay or salary
Company _____	From <u>2009 Apr/May</u>	Start \$
Address <u>BYRON</u>	To <u>Feb '10</u>	Final <u>\$9.80</u>
Telephone (____) _____	Your last job title _____	

Reason for leaving (be specific) child care

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

Name <u>Volt</u>	Supervisor name <u>Sheila</u>	
Position <u>Ass. start</u>	Employment dates	Pay or salary
Company _____	From <u>2008</u>	Start
Address <u>Mankato</u>	To	Final
Telephone (____) _____	Your last job title _____	

Reason for leaving (be specific) Hired on

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