



11/21
9AM

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 11/18/16

Name Tucker Wesley LaDell-William
Last First Middle Maiden

Present address 875 21st Ave SE
Number Street
Rochester MN 55904
City State Zip

Social Security No. 475 27 8529
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Telephone (612) 518 8104 E-Mail wtucker2028@gmail.com

If under 18, please list age _____ Referred by James Carter

Position applied for (1) <u>production</u> and salary desired (2) <u>\$15.00</u> (Be specific)	Shift available to work 1st _____ 2nd <u>2-10</u> ✓ 3rd _____
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How many hours can you work weekly? 30 hours Can you work nights? Yes

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

When available for work? Soon as possible

Do you have responsibilities or commitments that will prevent you from meeting specified work schedules?
☐ No ☒ Yes If so, please explain School

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>St. Croix Lutheran</u>	<u>1200 Oakdale Ave West St. Paul</u>	<u>4 years</u>	
College	<u>Rochester Comm.</u>	<u>831 30th Ave SE, Rochester</u>	<u>2 years</u>	<u>Exercise Science</u>
Bus. or Trade School				
Professional School				

APPLICATION FOR EMPLOYMENT

DO YOU HAVE A DRIVER'S LICENSE? ☒ Yes ☐ No

What is your means of transportation to work? Car (mobile)

Driver's license number 2552193989112 State of issue MN

Operator ☒ Commercial (CDL) ☐ Chauffeur ☐

Expiration date 12-22-2018

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

If so, how many? one

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 Tina Norman

Position

Company Wells Fargo

Address

Telephone (612) 518-0743

Name Becky Van Dyke

Position Fitness Executive

Company YMCA

Address 150 Thompson Ave

E Saint Paul, MN 55118

Telephone (651) 259-9626

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>Walter Tucker</u> Position <u>Staff member (Fitness)</u> Company <u>YMCA</u> Address <u>150 Thompson Ave</u> <u>SE West St. Paul 55118</u> Telephone <u>(651) 457-0048</u>	Supervisor name <u>Rebecca Van Dyke</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 <u>July 8 2016</u></td> <td>Start <u>9.50</u></td> </tr> <tr> <td>To _____</td> <td>Final <u>9.50</u></td> </tr> </table> Your last job title <u>Fitness Staff member</u>	Employment dates	Pay or salary	From <u>July 8 2016</u>	Start <u>9.50</u>	To _____	Final <u>9.50</u>
Employment dates	Pay or salary						
From <u>July 8 2016</u>	Start <u>9.50</u>						
To _____	Final <u>9.50</u>						
Reason for leaving (be specific) <u>School in Rochester</u>							
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. <u>- orientations</u> <u>- Supervising Fitness Center</u>							

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 _____
Employment dates	Pay or salary						
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To _____	Final _____						
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. 							

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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.

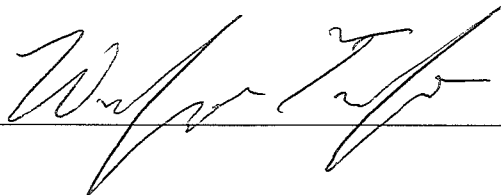
I understand that a comprehensive background check may be conducted to determine my eligibility for hire by CMG. This may include but is not limited to, investigations of criminal and/or conviction records, driving records and/or a drug screen test as required by clients, government regulations or by 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:

11/18/16

