



CMG APPLICATION FOR EMPLOYMENT

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

PLEASE COMPLETE PAGES 1-5		DATE <u>1-20-15</u>
Name <u>Alex Weigel</u> <small>Last First Middle Maiden</small>		
Present address <u>51682 Wood Duck</u> <small>Number Street</small> <u>Excelsior</u> <u>MN</u> <u>55331</u> <small>City State Zip</small>		
Social Security No. <u>471 02 6775</u>		
Telephone <u>952 242 7734</u>		E-Mail _____
If under 18, please list age _____		Referred by <u>MARK weigel</u>
Position applied for (1) <u>warehouse/production</u> and salary desired (2) <u>\$8.50 - 10:00</u> (Be specific)		Shift available to work 1 st <u>YES</u> 2 nd <u>YES</u> 3 rd <u>YES</u> <i>1st. Any shift</i>
How many hours can you work weekly? <u>40+ DK.</u>		Can you work nights? <u>YES</u>
Employment desired <input checked="" type="checkbox"/> FULL-TIME ONLY <input type="checkbox"/> PART-TIME ONLY <input type="checkbox"/> FULL- OR PART-TIME		
When available for work? <u>1-20-15</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>Chaska Co-op</u>	<u>Chaska MN</u>	<u>12</u>	<u>Basics</u>
College				
Bus. or Trade School				
Professional School				

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DO YOU HAVE A DRIVER'S LICENSE? Yes ___ No

What is your means of transportation to work? Own vehicle and father

Driver's license number B412028984304 State of issue MN

Operator ___ Commercial (CDL) ___ Chauffeur ___

Expiration date 06-29-2015

Have you had any accidents during the past three years? ___ Yes 2 No

If so, how many? _____

Have you had any moving violations during the past three years? ___ Yes 2 No

If so, how many? _____

Please list two references other than relatives or previous employers.

Name DAN Hobbs Name Sharon Moe

Position _____ Position _____

Company SELF Employed Company _____

Address Shakopee MN Address 20900 forest Dr
3539 Excelsior MN 55331

Telephone (612) 207 1478 Telephone (____) _____

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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>ATHC</u>		Supervisor name _____	
Position _____		Employment dates	Pay or salary
Company <u>Valley Staffing</u>		From <u>2000</u>	Start _____
Address <u>Shakopee mn 55329</u>		To _____	Final _____
Telephone <u>(952) 445 1180</u>		Your last job title _____	

Present

Reason for leaving (be specific) Still present

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

Sort recycling from trash, paper, cans

Name <u>Doherty Staffing</u>		Supervisor name _____	
Position <u>warehouse production</u>		Employment dates	Pay or salary
Company _____		From <u>2005</u>	Start <u>8.00</u>
Address <u>Edina</u>		To _____	Final <u>12.00</u>
Telephone () _____		Your last job title _____	

Reason for leaving (be specific) Still present

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

Warehouse, Shipping/Recycling, Production

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.

Name <u>Eddy moe</u>	Supervisor name <u>Eddy Moe</u>	
Position _____	Employment dates	Pay or salary
Company _____	From <u>97</u>	Start <u>16⁰⁰</u>
Address <u>Waconia MN</u>	To <u>2012</u>	Final <u>16⁰⁰</u>
Telephone () _____	Your last job title _____	

Reason for leaving (be specific) Retired

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

fix Docks, also repair reset posts

Name <u>Budget Plumbing</u>	Supervisor name <u>MARK WITZEL</u>	
Position _____	Employment dates	Pay or salary
Company _____	From _____	Start _____
Address <u>20920 Forest Dr</u> <u>Excelsior MN 55331</u>	To _____	Final _____
Telephone <u>(612) 805 3244</u>	Your last job title _____	

Reason for leaving (be specific) out of business

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

Dispatcher, carry machines, unclog drains

May we contact your present employer? h Yes ___ No

Did you complete this application yourself h 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.

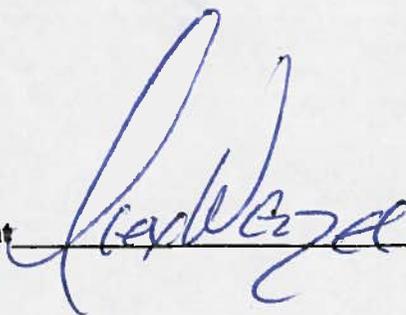
I understand that a comprehensive background check may be conducted to determine my eligibility for hire by CMG. This may include but is not limited to, investigations of criminal and/or conviction records, driving records and/or a drug screen test as required by clients, government regulations or by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

1-20-15