



Please return to  
 245 Industrial Blvd  
 Sauk Rapids  
 Any Questions Call  
 320.281.5617

### CMG APPLICATION FOR EMPLOYMENT

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

PLEASE COMPLETE PAGES 1-5 DATE 4-14-16

Name Wearing Michael J.  
Last First Middle Maiden

Present address 150 Hwy 10 n Lot 716  
Number Street  
St. Cloud MN 56309  
City State Zip

Social Security No. 468 - 88 - 2055

Telephone (320) 309-7620 E-Mail MikeJWearing@gmail.com

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

Position applied for (1) <u>Operator #10</u> and salary desired (2) _____ (Be specific)	Shift available to work 1 <sup>st</sup> <input checked="" type="checkbox"/> 2 <sup>nd</sup> <input checked="" type="checkbox"/> 3 <sup>rd</sup> <input checked="" type="checkbox"/>
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How many hours can you work weekly? \_\_\_\_\_ Can you work nights? yes

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>Apoth</u>	<u>St. Cloud MN</u>	<u>4</u>	<u>GED</u>
College				
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

Driver's license number G497040324820 State of issue MN

Operator \_\_\_ Commercial (CDL) \_\_\_ Chauffeur \_\_\_

Expiration date 1-16-19

Have you had any accidents during the past three years?  Yes \_\_\_ No

If so, how many? 1

Have you had any moving violations during the past three years?  Yes \_\_\_ No

If so, how many? 1

Please list two references other than relatives or previous employers.

Name John Hase Name Tony Hall

Position Picker Position Picker

Company FDC Company FDC

Address Sartell Mn. Address St. Cloud Mn.

Telephone (320) 534-8929 Telephone (320) 492-6998

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>FDC</u>	Supervisor name <u>Kirk Nestorvill</u>	
Position <u>PICKER / CDL DRIVER</u>	Employment dates	Pay or salary
Company _____	From <u>9-20-13</u>	Start <u>9.40</u>
Address <u>770 ANDERSON AVE.</u>	To <u>4-8-16</u>	Final <u>12.45</u>
<u>ST. CLOUD MN. 56303</u>	Your last job title <u>PICKER / CDL DRIVER</u>	
Telephone <u>(320) 656-8880</u>		

Reason for leaving (be specific) Said I lied during an investigation but they never talked to me.

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

Name _____	Supervisor name <u>Clyde</u>	
Position <u>Pork lift operator / trailer Jockey</u>	Employment dates	Pay or salary
Company <u>Specifying Coke</u>	From <u>5-4-13</u>	Start <u>10.00</u>
Address <u>7610 Russian Rd.</u>	To <u>9-10-13</u>	Final <u>10.50</u>
<u>ST. CLOUD MN. 56303</u>	Your last job title <u>same as position</u>	
Telephone <u>(320) 251-4207</u>		

Reason for leaving (be specific) caught the lead Forklift Driver smoking Dope outside.

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. move product on pallets to staging area. move trailer around

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 _____	Supervisor name <u>Randy Zirbess</u>	
Position <u>Belly Dump Driver</u>	Employment dates	Pay or salary
Company <u>Prison Contractors</u>	From <u>7-09</u>	Start <u>12.00</u>
Address <u>3632 Quail Rd. N.E. Saugk Rapids MN. 56374</u>	To <u>12-09</u>	Final <u>1200</u>
Telephone <u>(320) 255-55-06</u>	Your last job title <u>Belly Dump Driver</u>	

Reason for leaving (be specific) took time off to be with my kids

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. complet log's on truck + trailer, complet log's on loads hauler and what they were.

Name _____	Supervisor name _____	
Position <u>Belly Dump Driver</u>	Employment dates	Pay or salary
Company <u>WMD Scapaniak's Inc</u>	From _____	Start _____
Address <u>572 4th Street Holding Ford MN. 56346</u>	To _____	Final _____
Telephone <u>(320) 746-3331</u>	Your last job title _____	

Reason for leaving (be specific) Seasonal

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company. complet log's on truck + trailer. complet log's on loads hauler.

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:

9-16-16