

LM 6/18

Weds 6/20 10:00 interv



6/18 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 6/17/13

Name LEONE O. JACOB
Last First Middle Maiden

Present address 1928 19th The Avenue Apt #2
Number Street
Rochester MN 55901
City State Zip

Social Security No. 006 - 02 - 4957

Telephone (577) 271-9056 E-Mail leonejacob@netzero.net

If under 18, please list age N/A Referred by Wallin

Position applied for (1) Any Shift available to work
 and salary desired (2) 10.58 any that available
 (Be specific) 1st 2nd 3rd

How many hours can you work weekly? 40-50 hrs/wk Can you work nights? yes

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

When available for work? as soon as possible

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>Portland high school</u>	<u>Portland, ME</u>	<u>3 years</u>	<u>Diploma</u>
College	<u>Ashworth College</u>	<u>NOXROSS, GA</u>	<u>2 years</u>	<u>have finished the program 60 credits GPA: 2.70</u>
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), dates of conviction(s), sentence(s) imposed, and type(s) of rehabilitation. _____

APPLICATION FOR EMPLOYMENT

DO YOU HAVE A DRIVER'S LICENSE? Yes No

What is your means of transportation to work? Have my own car

Driver's license number 1329276 State of issue ME

Operator Commercial (CDL) Chauffeur

Expiration date 2/5/2015

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 Friday Bongomin Name Joseph Lony Oyak

Position Machine Operator Position Production

Company Opp INC Company Opp INC

Address Austin, MN Address Rochester, MN

Telephone (507) 219-6020 Telephone (507) 210 5035

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>LEONS O. JOOB</u>		Supervisor name <u>GENIE MILLS</u>	
Position <u>MACHINE OPERATOR</u>		Employment dates	Pay or salary
Company <u>ERWIN INDUSTRIAL TOOLS</u>		From <u>2003 -</u>	Start <u>7:50</u>
Address <u>37 BARTLET RD, GORHAM</u>		To <u>2013</u>	Final <u>13:00</u>
<u>ME, 04038</u>		Your last job title <u>MACHINE OPERATOR</u>	
Telephone <u>(207) 856-6111</u>		Reason for leaving (be specific) <u>Went abroad to visit a family</u>	
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. <u>Was running 4-6 machines in 8 hrs,</u> <u>Performed 15 minutes Quality Check</u> <u>Did set-up machines, and Lock/Tagout machines for safety</u>			

Name _____		Supervisor name _____	
Position _____		Employment dates	Pay or salary
Company _____		From _____	Start _____
Address <u>N/A</u>		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

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 _____ <i>n/a</i> 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						
From _____	Start _____						
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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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.							

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: _____

6/17/15

Leone O. Jacob
66 Veranda Street Apt#5
Portland, ME 04102
Cell: (207) 239-0516

Present Address

1928 19th Ave APT#2
Rochester, MN 55901
phone # 507 271-7056

EXPERIENCE

MACHINE OPERATOR

Irwin Tools Company(Nuwellrubbermaid) Gorham, ME 04/2003-05/2013

- Operated 3 to 6 machines in eight hrs
- Checked parts every 15 minutes for quality and counted parts for every pans.
- Enjoyed working in teams to achieve company goals
- Did setup machines with a Lock/Tagout procedure for the safety of affected employees
- Helped new hired employees with setups and 15 minutes quality check

WHEEL CHAIR ESCORTS

AVIATION SAFEGUARDS, Portland International Jetport, Portland, ME
08/2009-04/2010

- Escorted passengers from the Inbound and Outbound Flight
- Escorted passengers from the plane to the ground transportation safely.
- Watched and Checked everywhere within the Airport premises for security threats
- Enjoyed working in teams to achieve company goals

EDUCATION

Andover College, Portland, ME

Major: Criminal Justice 2008-2009 Earned 30 credits

Asworth College Norcross, GA

Major: Criminal Justice(CJ) Associate of Applied Science 20010-2012

Earned 60 credits with a GPA:2.70

ACTIVITIES AND AWARDS

- Awarded a Certificate for the completion of 4 weeks CITIZEN POLICE ACADEMY by Portland Chief of Police 2004
- Awarded Certificate recognizes student's effort to overcome all obstacles to satisfy a desire to learn 2004