



Weds 9/18 - 12:00 interview  
already

## CMG APPLICATION FOR EMPLOYMENT

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

PLEASE COMPLETE PAGES 1-5 DATE 9-11-2013

Name Roble Abdigadir Yabarow  
Last First Middle Maiden

Present address 2618 Georgetown Pl n.w  
Number Street  
Rochester mn 55901  
City State Zip

Social Security No. 853-50-3729

Telephone 507 271 0650 E-Mail \_\_\_\_\_

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

Position applied for (1) TIMPER ROOM Shift available to work  
 and salary desired (2) \_\_\_\_\_  
 (Be specific)  1<sup>st</sup>  2<sup>nd</sup>  3<sup>rd</sup>

How many hours can you work weekly? 30 hours Can you work nights? if needed

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

When available for work? anytime

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<br>(Complete mailing address) | NUMBER OF YEARS COMPLETED | MAJOR & DEGREE |
|----------------------|---------------------|--|---------------------------|----------------|
| High School          | <u>Jabir bintra</u> | <u>Ken Somalia</u>                     | <u>11 Year 2007</u>       |                |
| College              | <u>Yes</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. \_\_\_\_\_

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DO YOU HAVE A DRIVER'S LICENSE?  Yes  No

What is your means of transportation to work? so important

Driver's license number 01419996 State of issue SD

Operator  Commercial (CDL)  Chauffeur

Expiration date 05/15/2014

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 Halima Hussien Name ~~Salman~~ Saleman Shreikh

Position eppic Position burder

Company IBM Company ShowPlace

Address 3437 22nd Ave NW Address one Enterprise street  
Rochester M.N Harrisburg SD 57032

Telephone 507 253 1307 Telephone ~~605~~ 605 2743 2200

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>S B M</u>  | Supervisor name <u>Ed Elliot</u>                 |                            |
| Position <u>epic</u>   | Employment dates                                 | Pay or salary <u>16-60</u> |
| Company <u><del>IBM</del> <u>IBM</u></u>   | From <u>01-05-2012</u>                           | Start <u>10:00</u>         |
| Address <u>3437 22nd Ave NW</u>  | To <u>12-30-12</u>                               | Final <u>11:00</u>         |
| <u>Rochester MN</u>  | Your last job title <u>epic</u>                  |                            |
| Telephone <u>(507) 253 7307</u>  | Reason for leaving (be specific) <u>laid off</u> |                            |
| List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. |  |                            |

|  |   |                    |
|--|---|--------------------|
| Name <u>show place</u>   | Supervisor name <u>Bill</u>                                       |                    |
| Position <u>sprayer</u>  | Employment dates  | Pay or salary      |
| Company <u>IBM</u>   | From <u>01/15/13</u>  | Start <u>11:50</u> |
| Address <u>one Enterprises Street</u>  | To <u>08/23/13</u>  | Final <u>12:00</u> |
| <u>Harrisburg SD 57032</u>   | Your last job title <u>sprayer</u>                                |                    |
| Telephone <u>(605) 743 7200</u>  | Reason for leaving (be specific) <u>I just moved in Rochester</u> |                    |
| 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 <del>Home Care</del> Home care   | Supervisor name <u>Halimo</u>                   |                    |
| Position <u>Taken Care For Adults</u> | Employment dates                                | Pay or salary      |
| Company <u>Jilicow home care</u>      | From  | Start <u>10:00</u> |
| Address <u>1505 MARION RD SE</u>      | To  | Final <u>10:25</u> |
| Telephone <u>507 202 7610</u>         | Your last job title <u>Take care for people</u> |                    |

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.

|                        |                           |               |
|------------------------|---------------------------|---------------|
| Name _____             | Supervisor name _____     |               |
| Position _____         | Employment dates          | Pay or salary |
| Company _____          | From                      | Start         |
| Address _____          | 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.

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: 09-11-2013

CMG

## Preliminary Questions

Name: Abdiradik Roble

Date: 9/18/2013

1. If hired, can we run a national background study? YES
2. If hired are you willing to take a drug test? YES
3. Are you able to work with soy, wheat, peanuts & milk? YES
4. Are you able to work with pork? YES
5. Which plant do you prefer? Open
6. What shift do you prefer? 2nd

If called for an interview please bring two forms of identification.

(Social Security Card, Birth Certificate, passport and license or permanent resident card)