

**Texas**

USA  
TX

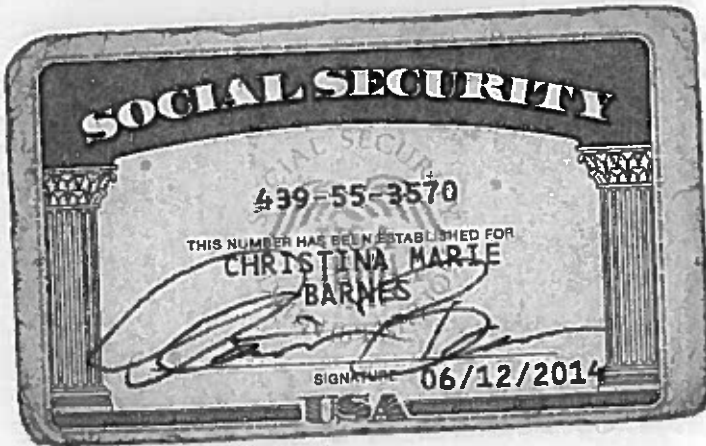
**IDENTIFICATION CARD**



4d ID **23877692**  
4a Iss **11/13/2012** 4b Exp **11/28/2018**  
3 DOB **11/28/1983**  
1 BARNES  
2 CHRISTINE MARIE  
4 4000 W TIDWELL  
HOUSTON TX 77091-0000

*Christina Barnes*

16 Hgt **5-05** 15 Sex **F** 18 Eyes **BRO**  
5 DD **18211291110153957368**



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Your Hospitality Staffing Professionals  
665 Third St., Suite 415 • San Francisco, CA 94107

First and Last Name: Christine Barnes  
Email: ChristineTurk16@gmail.com  
Phone number: 832 669 2674

## Working Experience:

Company Name: Burlington Coat Factory  
Dates of Employment: 07/2013 - 06/2015  
Job Responsibility:

- - Managed cash drawer balances and receipts
- - Restock and arrange ~~fast storage~~ shelves.
- - provided excellent customer service

Company Name: Momorial Hermann  
Dates of Employment: 6/2015 - 2/2016  
Job Responsibility:

- - Deliver trays to patient rooms
- - Prep and setup food trays
- - Restock and arrange food storage cooler.

Company Name: Hillcroft Doctors  
Dates of Employment: 9/2010 - 2/2011  
Job Responsibility:

- - provided assistance to 2 physicians
- - Completed patients charts
- - scheduled patient appointments
- - Validated prescriptions.

## Skills

- - ability to communicate with customer in a timely
- - ability to handle cash drawer and receipts
- - ability to validate prescriptions.

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## Employment Application

816-501-9067

Acrobat Outsourcing is an equal opportunity employer dedicated to non-discrimination in all employment practices. Acrobat Outsourcing selects the best qualified individual for the job based on job-related qualifications regardless of race, age (40+), color, religion, gender, national origin, ancestry, marital status, sexual orientation, disability or any other status protected by applicable law.

### PLEASE PRINT

Full Name Christine Barnes Date: 8/22/2016  
Home Telephone (832) 669 2674 Other Telephone ( )  
Present Address 3818 Southlawn #4  
Permanent Address, if different from present address:  
Email Address ChristineTurkl@gmail.com

### EMPLOYMENT DESIRED

Position applying for: Food service or OPEN or Admin Salary desired: \$11 or more hr.  
Are you currently registered with any staffing and/or employment agencies? If so, please list  
N/A

Are you applying for: Full-time work? Yes ☒ No ☐ Part-time work? Yes ☐ No ☐  
Temporary work, e.g., summer or holiday work? Yes ☐ No ☒ From: To:  
How did you find out about our open position? (Please check fill in proper name of source):  
Referral ☐ Name of Referral Newspaper ☐ Job Fair ☐ Agency ☐ Company Website ☒  
Other Web Posting ☐ Other Source ☒  
Could you work overtime, if necessary? Yes ☒ No ☐ If hired, on what date could you start working? ASAP

Please keep in mind that schedules and shifts may vary depending on position and season. Additionally, the hours may vary from week to week, depending on the company needs. Please list only the times/days you're available to work below.

SPECIFY HOURS AVAILABLE DAILY	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
AM							
PM	<u>5 til</u>	<u>5 til</u>	<u>5 til</u>	<u>5 til</u>	<u>5 til</u>	<u>5 til</u>	<u>5 til</u>
Do you have any vacations or extended leaves planned in the next 12 months? If so, please list dates:							

### PERSONAL INFORMATION

Have you ever applied to or worked for Acrobat Outsourcing before? Yes ☐ No ☒ If yes, when?  
Do you have friends or relatives working for Acrobat Outsourcing? Yes ☐ No ☒ If yes, please state name and relationship  
If hired, would you have a reliable means of transportation to and from work? Yes ☒ No ☐  
If hired, can you present evidence of your legal right to live and work in this country? Yes ☒ No ☐  
State age if you are under 18 \_\_\_\_\_. If you are under 18, hire is subject to verification that you are of minimum legal age to work.  
Are you able to perform the essential functions of the job for which you are applying? Yes ☒ No ☐



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If no, describe the functions that cannot be performed. (Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions.)

Pursuant to the San Francisco Fair Chance Ordinance, we will consider for employment qualified applicants with arrest and conviction records.

## EDUCATION & SKILLS

NAME OF SCHOOL	CITY & STATE	GRADE OR DEGREE COMPLETED	DID YOU GRADUATE?
Everest	Houston, TX	Yes	yes
Do you have any special licenses, certificates or special training? If so please list under "Special".		<input checked="" type="radio"/> YES	<input checked="" type="radio"/> NO
Are you computer literate? If so, list software knowledge under "Special."		<input checked="" type="radio"/> YES	<input checked="" type="radio"/> NO
Are you proficient with Point of Sales Systems? If, so please list which ones under "Special."		YES	<input checked="" type="radio"/> NO
Do you have any other experience, training, qualifications or special skills, which you feel make you especially suited for work at Acrobat Outsourcing? If so, please list under "Special."		<input checked="" type="radio"/> YES	NO
Special: <u>the ability to learn new thing at first sight.</u>			

## EMPLOYMENT HISTORY

List below all present and past employment starting with your most recent employer (last 10 years is sufficient). Account for unemployment periods of three months or more.

Are you currently employed? Yes \_\_\_ No ☒ If so, may we contact your current employer? Yes \_\_\_ No \_\_\_

Name and Address of Employer Memorial Hermann 6411 Fannin St.

Type of Business Food service Telephone No. (713) 704 4000 Supervisor's Name Tonya

Your Position and Duties Deliver trays to patient rooms, prep and setup food trays & restock and arrange food storage.

Dates of Employment: From 6/2015 To 2/2016 Weekly Pay: Starting 11.00 hr Ending 9.92 hr

Reason for Leaving: Cut of pay & hours.

Name and Address of Employer Hillcroft Doctors 6535 Southwest Fwy

Type of Business Clinic Telephone No. (713) 988 3921 Supervisor's Name Kay

Your Position and Duties provided assistance to 2 physicians, completed Patients Charts & Validated Prescription

Dates of Employment: From 9/2010 To 2/2011 Weekly Pay: Starting N/A Intern Ending N/A Intern

Reason for Leaving: End of Intern hours.

Name and Address of Employer Burlington Coat Factory 12005 Northwest Fwy

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Type of Business department store Telephone No. (713) 476 9500 Supervisor's Name Bill  
Your Position and Duties Cashier, managed cash drawer balance & restock shelves & provided excellent customer service  
Dates of Employment: From 7/2013 To 6/2015 Weekly Pay: Starting \$8.50/hr Ending \$8.50/hr  
Reason for Leaving: needed something that would pay more and more hrs.

Name and Address of Employer \_\_\_\_\_

Type of Business \_\_\_\_\_ Telephone No. (\_\_\_\_) \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

Your Position and Duties \_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_ Weekly Pay: Starting \_\_\_\_\_ Ending \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Have you ever been fired from any previous place of employment? If so, please explain: \_\_\_\_\_

## MILITARY SERVICE

Have you obtained any special skills or abilities as the result of service in the military?  
If so, describe: \_\_\_\_\_

Yes \_\_\_\_\_ No ☒

## JOB RELATED REFERENCES

List below three persons not related to you who have knowledge of your work performance within the last three years.

Name: Ariana Thomson Telephone No. (832) 461-9814

Address \_\_\_\_\_

Occupation: NRG Food stand Relationship: ex co-worker Number of Years Acquainted: 3 yrs

Name: Kissy Harris Telephone No. (832) 420 3686

Address \_\_\_\_\_

Occupation: Don't know Relationship: ex co-worker Number of Years Acquainted: 5 yrs

Name: Bill Telephone No. (713) 476 9520

Address 12005 Northwest Fwy

Occupation: Manager at Burlington Relationship: ex Manager Number of Years Acquainted: 4 yrs

**Please Read Carefully, Initial Each Paragraph and Sign Below**

C.B

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material facts on this application or on any document used to secure employment shall be ground for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

C.B

I hereby authorize Acrobat Outsourcing to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

C.B

I hereby authorize Acrobat Outsourcing and its authorized representatives to solicit information regarding my background, which may include but not be limited to, information about my employment, education, and/or criminal history, which may be in the files of any federal, state, or local criminal justice and law enforcement agency and general public records history.

C.B

I understand that if selected for hire, it will be necessary for me to provide satisfactory evidence of my identity and legal authority to work in the United States, and that federal immigration laws require me to complete an I-9 form in this regard within three days of my hire date.

C.B

Acrobat Outsourcing is an at-will employer. I understand that nothing contained in the application, or conveyed during any interview, which may be granted or during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, with or without cause, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative.

I hereby acknowledge that I have read and understand the above statements.

**Applicant's Signature**



**Date**

8/22/2016