

Interview Note Sheet

Applicant Information

Name: <u>Melvin Boyd Jr.</u>	Interviewer: <u>Steven Gonzalez</u>
Date: <u>01/17/18</u>	Rate of Pay: \$ <u>9.25 - \$10.00</u>
Position (s) Applied for: <u>Housekeeping / Server</u>	Referred by: <u>Jr Work Force</u>

Test Scores

Position	Score	%	Position	Score	%
Server	/35	%	Bartender	/35	%
Prep Cook	/20	%	Barista	/15	%
Grill Cook	/40	%	Cashier	/15	%
Dishwasher	/10	%	Housekeeping	/12	%

Full-Time

Part-Time

Relevant Experience & Summary of Strengths

Total of _____ in Food Service/Hospitality

Worked in maintenance at a hospital.

Worked at Ihop as a Server and Prep cook, years ago.

P.O.S. Experience: Y / N details: _____

Transportation

Car

Public Transit

Carpool (Rider / Driver)

Regions Available to work:

Kansas City, KS

Overland Park, KS

Kansas City, MO

Independence, MO

Certifications (if any)

TiPS

Serv-Safe

LEAD

Other _____

Will Submit

Availability

Open

AM only

PM only

Weekdays only

Weekends only

Details:

Uniforms Owned:

Bistro

Black Bistro

Tuxedo

1/2 Tuxedo

Black Vest

Long Black Tie

Chef Coat

Chef Pants

Knives

Black Pants

Non-Slip Shoes

Bow Tie

Other: _____

Would you recommend this applicant for Acrobat Academy?

Convention Candidate?

Other Languages Spoken:

Employment Application

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 Melvin Boyd Jr. Date: 1/16/2018
 Home Telephone (417) 4414 Other Telephone (913) 258-6599
 Present Address 9254 Hadley Dr Overland Park
 Permanent Address, if different from present address: 594492
 Email Address MelvinboydJr100@gmail.com

EMPLOYMENT DESIRED

Position applying for: _____ Salary desired: \$14.00

Are you currently registered with any staffing and/or employment agencies? If so, please list

No

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? 1/17/2018

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	<u>1</u>	<u>6:30A</u>	<u>6:30A</u>	<u>6:00A</u>	<u>6:30A</u>	<u>6:30A</u>	<u>6:00A</u>
PM		<u>3:00P</u>	<u>3:00P</u>	<u>10:00PM</u>	<u>3:00PM</u>	<u>3:00P</u>	<u>10:00PM</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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Your Hospitality Staffing Professionals

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.)

EDUCATION & SKILLS

NAME OF SCHOOL	CITY & STATE	GRADE OR DEGREE COMPLETED	DID YOU GRADUATE?
Topeka High School	Topeka KS.	.	Yes
Do you have any special licenses, certificates or special training? If so please list under "Special".		YES	NO
Are you computer literate? If so, list software knowledge under "Special."		YES	NO
Are you proficient with Point of Sales Systems? If so please list which ones under "Special."		YES	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."		YES	NO
Special:			

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 Ossometonic State Hospital

Type of Business Hospital Telephone No. (913) 755-7000 Supervisor's Name Mavis Mallory

Your Position and Duties Design, leisure activities, implement them, observe participation and document engagement. Decrease negative behaviors

Dates of Employment: From 5/5/2013 To 5/6/2015 Weekly Pay: Starting \$16.35 Ending \$16.47

Reason for Leaving: Retired from State of Kansas

Name and Address of Employer KNT

Type of Business Hospital Telephone No. (705) 296-5346 Supervisor's Name Curtis Landers

Your Position and Duties Job Coach, pass medication from room to room. Clean bedrooms, laundry, escort to appointments, report Dr appointment, documentation

Dates of Employment: From 8/17/2012 To 4/30/2013 Weekly Pay: Starting 9.75 Ending \$16.34

Reason for Leaving: Transfer to OSH

Name and Address of Employer _____

Type of Business _____

Telephone No. (____) _____ Supervisor's Name _____

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Your Hospitality Staffing Professionals

Your Position and Duties _____

Dates of Employment: From _____ To _____ Weekly Pay: Starting _____ Ending _____

Reason for Leaving: _____

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? Yes No
If so, describe: _____

JOB RELATED REFERENCES

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

Name: Joe Swopes Telephone No. (785) 383-5114

Address Topeka KS

Occupation: Retired Navy Relationship: brother inlaw Number of Years Acquainted: 50

Name: Johnnie Boyd Jr Telephone No. (785) 266-7424

Address 3201 Wisconsin St Topeka KS

Occupation: Retired Relationship: Brother Number of Years Acquainted: 60 59 yrs

Name: Harold Holmes Telephone No. (785) 338-3482

Address Topeka KS

Occupation: MRT-I Relationship: Friend Number of Years Acquainted: 20 yr

Please Read Carefully, Initial Each Paragraph and Sign Below

MB 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 grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

MB 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.

MB 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.

MB 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.

MB 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 1/16/2018

Melvin Boyd Sr.

9754 Hadley Dr.
Overland Park, KS 66212
913-258-6599
melboydsr57@gmail.com

Objective Highly qualified, patient care oriented Behavioral/Mental Health activities coordinator and provider seeking employment within the behavioral health industry. Offering expertise in home management skills training and writing /implementation of CFA's, PLD's, and basic lifestyle assessment programs.

Trainings & Certifications

- CMA certified
- Occupational Therapy certification
- CPR certified
- AED training
- First Aid

Healthcare Professional Experience

- Over 28 years of experience in healthcare, job training
- Proficient expertise in implementation, observation, collection of data, and documentation of perioral and cognitive activities, plans, and assessments.
- Expert level experience training patients to live independently based on their cognitive abilities
- 28 years of experience advocating for patients and support teams through use of learning support, home management skills training, and job coaching
- Over 28 years of expertise writing and implementing development programs
- Extensive experience leading group activities for individuals with cognitive and behavior disorders
- Expert level experience designing health and fitness programs for the behavioral health community
- Over 28 years of experience dispensing appropriate medication levels based on the orders of license medical professionals

Trainings & Certifications

- CMA certified
- CPR certified
- AED training
- First Aid

Recognitions & Education

- Topeka High School; Graduated 1976; High School Diploma; Topeka, KS
- Letter of Recognition from Governor Parkinson (2012)
- Letter of Recognition from Kansas Neurological Institute (2013)
- Letter of Recognition from Don Jordan (2011)

Professional Experience

▪ Laborer (2015 – current) Amazon Logistics Center

- Prepares orders by reviewing order request

- Pulling materials; packing boxes; placing orders in delivery area
- Operation of warehouse equipment to move heavy cargo

Activity Specialist (2013 – 2015) Rainbow Mental Health Facility

- Wrote and implemented structured leisure activity programs
- Observed, documented, and reported activities progress and outcomes
- Lead group activities with the purpose of improving negative behaviors through increased engagement
- Led staff meetings

MRT-I/Job Coach (1987-2013) Kansas Neurological Institute

- Patient and Family Advocate
- Provide home management and Learning opportunities for patients, support teams, and families
- Medication dispensing and job coaching
- Wrote, implemented, and documented progress of individualized lifestyle plans for patients
- Transported patients to and from medical appointments

Name: Melvin Boyd Jr

Score 12/14

Housekeeping Test

1. During which of the following situation(s) should you wear gloves?
 - a) When handling disinfectant solutions
 - b) When cleaning guest rooms
 - c) When handling soiled linen
 - d) When handling or disposing of waste
 - e) All of the above
2. Which of the following should be cleaned daily?
 - a) Chairs, lamps, and tables
 - b) Tabletops, bed, and handrails
 - c) Grab bars, light, tops of doors and counters
 - d) Floors, sinks, toilets, and latrines
 - e) All of the above
3. True or False: You do not need to use a separate cloth for cleaning bathrooms.
4. True or False: Dusting is most commonly used for cleaning walls, ceiling, doors, windows and furniture.
5. Should the following be cleaned daily or weekly? Circle one.

<input checked="" type="checkbox"/> a) Floors	Daily/ Weekly
<input type="checkbox"/> b) Toilets and latrines	Daily/ Weekly
<input type="checkbox"/> c) Carpets in guest rooms	Daily/ Weekly
<input type="checkbox"/> d) Carpets in offices	Daily/ Weekly
<input type="checkbox"/> e) Soiled linen	Daily/ Weekly
6. The best way to clean the floors:
 - a) Scrubbing
 - b) Dry sweeping and dusting
 - c) Sweeping, mopping and dusting
 - d) Wet mopping
7. What should do if you spill liquids or see a liquid spill?
 - a) Leave it for someone else to clean- up
 - b) Wait until the end of your shift to clean it
 - c) Flag the spill and clean it up immediately
 - d) Not sure
8. The proper procedure for cleaning spills of blood and other body fluids is:
 - a) Wearing gloves, clean with cloth soaked in chlorine solution and follow up with disinfectant solution
 - b) Find the janitor on- duty and ask him to clean it up
 - c) Grab whatever is closest and wipe up immediately, then mark "Biohazard"
 - d) Nothing
9. What do you do if you encounter with bed bugs in a guest room?
Report to supervisor / follow instruction
10. What do you do if you find Lost and Found items in a guest rooms?
Turn it in to supervisor
11. Describe the difference between a disinfectant and a cleaning solution?
disinfect / remove dirt, dust

Servers Test

Multiple Choice

- 1) Food is served on what side with what hand?
 - a) On the left side with the left hand
 - b) On the left side with the right hand
 - c) On the right side with the left hand
 - d) On the right side with the right hand
- 2) Drinks are served on what side with what hand?
 - a) On the left side with the left hand
 - b) On the left side with the right hand
 - c) On the right side with the left hand
 - d) On the right side with the right hand
- 3) Food and drinks are removed on what side with what hand?
 - a) On the left side with the left hand
 - b) On the left side with the right hand
 - c) On the right side with the left hand
 - d) On the right side with the right hand
- 4) What part of a glass should you handle at all times?
 - a) The stem
 - b) The widest part of the glass
 - c) The top
- 5) When you are setting a dining room how should you set up your tablecloths?
 - a) Neatly and evenly across the tables
 - b) The creases should all be going in the same directions
 - c) The chairs should be centered and gently touching the table cloth
 - d) All of the above
- 6) If you bring the wrong entrée to a guest what should you do?
 - a) Go back into the kitchen and patiently wait in line behind the rest of the servers until it's your turn
 - b) Inform the guests that you will bring the correct entrée once everyone else in the dinning room is served
 - c) Try to convince the guests to eat what you brought them
 - d) Go back into the kitchen to the front of the line and inform the expeditor that you need a different entrée

Match the Correct Vocabulary

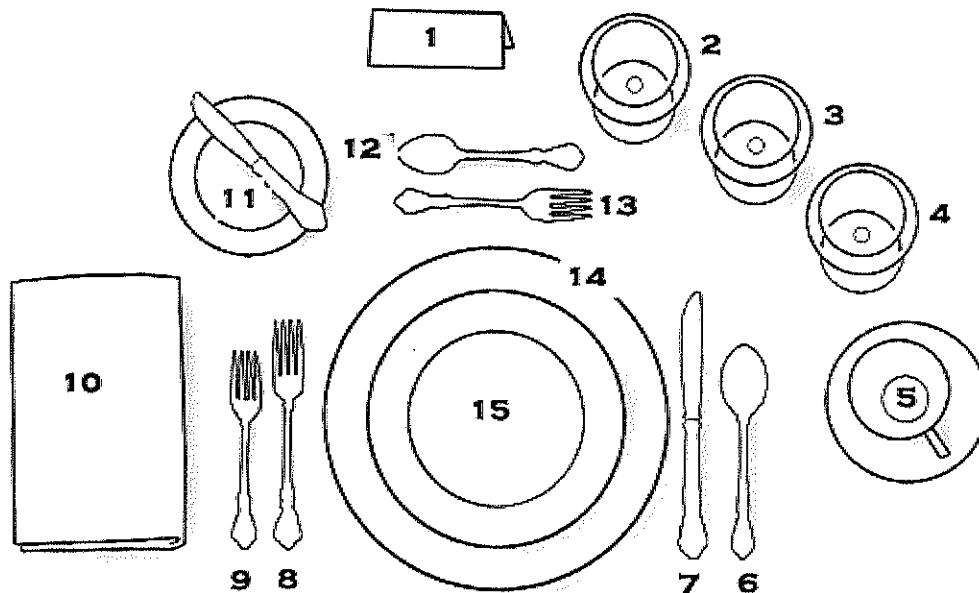
- C Scullery
- D Queen Mary
- B Chaffing Dish
- E French Passing
- A Russian Service
- F Corkscrew
- D Tray Jack

- A. Metal buffet device used to keep food warm by heating it over warmed water
- B. Style of service where food is prepared or served individually at the dinner table to fit the customer's specific taste (i.e. providing dressing and pepper for salad or handing out bread to each patron)
- C. Used to hold a large tray on the dining floor
- D. Area for dirty dishware and glasses
- E. Large metal shelving unit for prepared food to be held or for dirty trays to be stored
- F. Used to open bottles of wine
- G. Style of dining in which the courses come out one at a time

Name Melvin Bagal Jr

Score / 35

Servers Test



Match the Number to the Correct Vocabulary

10 Napkin

11 Bread Plate and Knife

1 Name Place Card

6 Teaspoon

13 Dessert Fork

12 Soup Spoon

15 Salad Plate

2 Water Glass

7 Dinner Fork

5 Tea or Coffee Cup and Saucer

2 Dinner Knife

8 Wine Glass (Red)

9 Salad Fork

14 Service Plate

3 Wine Glass (White)

Fill in the Blank

1. The utensils are placed _____ inch (es) from the edge of the table.
2. Coffee and Tea service should be accompanied by what extras? _____
3. Synchronized service is when: _____
4. What is generally indicated on the name placard other than the name? _____
5. The Protein on a plate is typically served at what hour on the clock? _____
6. If a guest asks for a specialty dinner (i.e. Gluten-Free or Vegetarian) you should do what immediately?



SENSITIVE BUT UNCLASSIFIED

Case Verification Number: 2018017133039BW

Report Prepared: 01/17/2018

Company Information

Company ID: 139349

Company Name: Acrobat Outsourcing

Employee Information

Last Name: Boyd

First Name: Melvin

Date of Birth: 12/22/1957

Social Security Number: *** * 1603

Hire Date: 01/17/2018

Citizenship Status: A citizen of the United States

Document Information

List B Document: Driver's license or ID card issued by a U.S. state or outlying possession

List C Document: Social Security Card

Document Name: Driver's license

Document State: Kansas

Driver's License or ID Card Number:

Document Expiration Date: 12/22/2022

Case Status Information

Final Case Result: Employment Authorized

Employer Case ID:

Case Submitted On: 01/17/2018

Case Submitted By: DZAM1515

Closed On: 01/17/2018

Closed By: DZAM1545

Closure Statement: The employee continues to work for the employer after receiving an Employment Authorized result.

SENSITIVE BUT UNCLASSIFIED