

Application for Employment
Pre-employment questionnaire

DEBLIN, INC.

Name and Address	
Full Name	Social Security Number
Address	
Phone Number	Email

Employment Desired	
Position	
Date you can start	Salary Desired
Are you employed now?	If so, may we contact your present employer?
Have you ever applied to this company before?	If so, when and where?

Education and Skills

List your education history				
	Name and Location of School	Years Attended	Did you Graduate?	Subjects Studied
High School				
College				
Trade, Business, or Correspondence School				

List any special skills and/or trainings.

Former Employer

List below your last four employers, starting with most recent.					
	Date, Month and Year	Name and Address of Employer	Salary	Position	Reason for Leaving
1					
2					
3					
4					

References

List the names of three people not related to you, whom you have known at least one year.				
	Name	Address	Business	Years Known
1				
2				
3				

Authorization

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from any liability for any damage that may result from utilization of such information. I also understand and agree that no representative of the company has any authority to enter into any agreement for employment specified period of time or to make any agreement contrary to the foregoing unless it is in writing and signed by an authorized company representative. This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the America Abilities Act (ADA) and other relevant federal and state laws. I understand that a consumer credit report or criminal records check may be necessary prior to my employment. If such reports are desired, I understand that, in compliance with federal law, the company will provide me with a written notice regarding the use of these reports and will also obtain a separate written authorization from me to consent to these reports. I also understand that a poor credit history or conviction will not automatically result in disqualification from employment." In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.

Signature: _____

Date: _____

Deblin, Inc, is an Equal Opportunity Employer. As required by law, we must record certain information to be made a part of our Affirmative Action Program. Applicants for employment are also invited to participate in the Affirmative Action Program by reporting their status as disabled, disabled veteran, veteran of the Vietnam era or other minority. In extending this invitation you are also advised that: (a) workers (applicants) are under no obligation to respond, but may do so in the future if they choose; (b) responses will remain confidential. We are a company that values diversity. We actively encourage women and minorities to apply. Refusal to provide this information will have no bearing on your application and will not subject you to any adverse treatment. Please complete the information requested below. Thank you for your cooperation.

Section 1: General Applicant Information

Full Name	Today's Date
Position Applied For	

Section 2: Check all that apply

Race or Ethnicity	Gender	Veteran Status	Other
<input type="radio"/> Hispanic or Latino <input type="radio"/> White (Not Hispanic or Latino) <input type="radio"/> Black or African American (Not Hispanic or Latino) <input type="radio"/> Native Hawaiian or Pacific Islander (Not Hispanic or Latino) <input type="radio"/> Asian (Not Hispanic or Latino) <input type="radio"/> American Indian or Alaskan Native (Not Hispanic or Latino) <input type="radio"/> Two or More Races (Not Hispanic or Latino)	<input type="radio"/> Male <input type="radio"/> Female	<input type="radio"/> Vietnam Era Veteran <input type="radio"/> Disabled Veteran <input type="radio"/> Other Protected Veteran <input type="radio"/> Recently Separated Veteran <input type="radio"/> Amed Forces Service Medal Veteran	<input type="radio"/> Individual with Disabilities

Signature: _____ Date: _____