



SPECIALIZED BUILDERS

DEB Construction, Inc.

EMPLOYMENT APPLICATION

DEB Construction, Inc. does not unlawfully discriminate on the bases of race, color, creed, religion, gender (including pregnancy, childbirth, breastfeeding, or related medical conditions), national origin, ancestry, age, physical or mental disability, medical condition including genetic characteristics, or any information based on genetic background, family-care status, military and veteran status, citizenship status, marital status, or sexual orientation, gender identity, or gender expression where a person's gender-related appearance and behavior may not be stereotypically associated with the person's assigned sex at birth, or any other consideration made unlawful by federal, state, or local laws. This prohibition also includes a perception that anyone has any of those characteristics, or is associated with a person who has or is perceived as having any of those characteristics. Additionally, the Company does not discriminate against any employee who is an officer, warrant officer, or enlisted member of the military or naval forces of the state or of the United States because of that membership. DEB Construction, Inc. does not discriminate against any "qualified individuals with a disability." Individuals qualify for employment if they meet the education, skills, and experience requirements of a position and can perform the essential functions of the job with or without a reasonable accommodation.

All employment at DEB Construction, Inc. is "at will", meaning that future employment between you and DEB Construction, Inc. can be terminated at any time, with or without advance notice, and with or without cause.

PLEASE PRINT ALL INFORMATION
REQUESTED EXCEPT SIGNATURE



APPLICATION FOR EMPLOYMENT

PLEASE COMPLETE PAGES 1-4.

DATE _____

Name _____
Last First Middle

Present address _____
Number Street City State Zip

Email: _____

Telephone (____) _____ Work (____) _____

Cell (____) _____

Position applied for (1) _____

and salary desired (2) _____

(Be specific)

Days/hours available to work:

No Pref _____ Thur _____

Mon _____ Fri _____

Tue _____ Sat _____

Wed _____ Sun _____

How many hours can you work weekly? _____ Can you work nights? _____

I acknowledge that I may be required to work overtime as assigned

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

When available to start work? _____

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Professional School				

HAVE YOU EVER WORKED OR ATTENDED SCHOOL UNDER A DIFFERENT NAME? No Yes

If yes, please provide that name: _____

ARE YOU UNDER 18 YEARS OLD? No Yes

If yes, please attach a copy of your work permit.

IF YOU WERE OFFERED A POSITION, DO YOU HAVE THE LEGAL RIGHT TO WORK IN THE UNITED STATES?

No Yes

Have you ever been convicted of a felony, or a misdemeanor involving any violent act, use or possession of a weapon or act of dishonesty for which the record has not been sealed or expunged? (Exclude convictions for marijuana-related offenses for personal use more than two years old; convictions that have been sealed, expunged or legally eradicated, and misdemeanor convictions for which probation was completed and the case was dismissed)

No Yes

If yes, please briefly describe the nature of the conviction(s), the date and place of conviction and the legal disposition of the case. This company will not deny employment to any applicant solely because the person has been convicted of a crime. The company however, may consider the nature, date and circumstances of the conviction as well as whether the conviction is relevant to the duties of the position applied for.

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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 of employer Address City, State, Zip Code Phone number	Name and Phone # of last supervisor	Employment dates	Pay or salary
		From To	Start Final
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		Your last job title:	
Reason for leaving (be specific)			
List job duties, skills used or learned, advancements or promotions while you worked at this company.			

Name of employer Address City, State, Zip Code Phone number	Name and Phone # of last supervisor	Employment dates	Pay or salary
		From To	Start Final
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		Your last job title:	
Reason for leaving (be specific)			
List job duties, skills used or learned, advancements or promotions while you worked at this company.			

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		From To	Start Final
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		Your last job title:	
Reason for leaving (be specific)			
List job duties, skills used or learned, advancements or promotions while you worked at this company.			

If applicable, please refer to the attached job description for the position for which you are applying. Are you able to perform all these tasks with or without reasonable accommodation? _____ Please describe which tasks, if any, you will need accommodation to perform, and explain what type of accommodation you will need: _____

Please describe: _____

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APPLICATION FOR EMPLOYMENT

Do you have a reliable means of transportation to work? Yes No

FOR JOBS WHERE DRIVING IS A REQUIREMENT, you will be required to provide a valid driver's license and proof of automobile insurance.

Will you be able to provide both? Yes No

Please list at least three individuals qualified to give an opinion of your professional work ability and work experience. Two out of three should be previous supervisors.

Name	Relationship	Employer	Phone Number

Did you complete this application yourself Yes No If not, who did? _____

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING

Note: It is the practice of DEB Construction, Inc. to maintain a safe, and efficient working environment. As part of this practice, we conduct drug testing, medical examination, background and reference checks. In addition, if hired, you must furnish proof of your authorization to work in the United States as specified under applicable U.S. Immigration Laws. One of these documents must be photo identification. If you are employed by DEB Construction, Inc. you understand and agree that your employment is on an "at will" basis and may be terminated with or without cause, with or without notice at any time, at the option of either DEB Construction, Inc. or yourself. You understand that as a condition of employment all applicants will be asked to sign a confidentiality disclosure agreement. Failure to sign or abide by such agreements may result in dismissal.

- _____
Initial (1) I certify that the answers I have given to the foregoing questions and statements are true and correct, without mental reservation of any kind, and I authorize DEB Construction, Inc. to verify them.
- _____
Initial (2) If I obtain employment resulting from this application, I agree to comply with all orders, rules, and regulations of the Company.
- _____
Initial (3) I authorize DEB Construction, Inc. to conduct reference checks from my former employers and authorize all educational institutions to give transcripts of my records and grades. I release them and their organizations from all liability for any damage whatsoever for issuing same.
- _____
Initial (4) If hired, a copy of my most recent payroll check stub and evidence of my highest education degree may be required prior to start date.
- _____
Initial (5) If upon investigation, anything in this application is found to be untrue, I understand that I will be subject to dismissal at any time during the period of my employment.
- _____
Initial (6) I understand that, in connection with my application for employment or during my employment if I am employed, DEB Construction, Inc. may obtain information bearing upon my general reputation, personal characteristics or mode of living, including public record information, without using a consumer reporting agency to obtain it. "Public record" includes records documenting a conviction, civil judicial action, tax lien, or outstanding judgment against me.
 - I waive the right to receive a copy of any public record that the Company may obtain about me.
 - I do not waive the right to receive a copy of any public record that the Company may obtain about me.

I have read, acknowledge, understand, and agree to the above.

SIGN AND DATE HERE: _____
Signature

Date