



2400 Magnolia Ct.
Richmond, VA 23223

804-359-2400

POSITION APPLIED FOR	Date:
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Thank you for your interest in Party Perfect. Only final candidates for posted openings will be contacted personally.

GENERAL INFORMATION

Name (last, first, middle initial)	Social Security No. (Optional)
Street Address	City, State, Zip
Home Phone No.	Work Phone No.
Cell Phone No.	Email
Are you authorized to work in the United States? Proof of Authorization will be required post hire.	
Yes No	

TRAINING AND EDUCATION

CIRCLE HIGHEST GRADE COMPLETED:	8	9	10	11	12	GED
Colleges/other training	Major/subject	Degree/certificates				

ADDITIONAL SKILLS Describe skills relevant to the job for which you are applying

SKILL	TYPE OF EXPERIENCE	LEVEL OF EXPERTISE
Office equipment, (typing speed, programs, etc.)		
Technical skills, professional licenses		
Computers		
Software		
Other		
Can you perform the essential functions of the job with or without reasonable accommodation? Yes No		

Date available to start ___/___/___ What is your desired salary range? _____

Are you available to work ___Full -Time___Part -Time

BACKGROUND INFORMATION

EACH CASE IS CONSIDERED SEPARATELY BASED ON JOB DUTIES AND PERFORMANCE AREAS

Do you have a valid Virginia State Driver's License? Yes No Other State _____

(If position applied for involves driving), have you been convicted, pleaded to no contention or paid a fine for any traffic violations in the past three (3) years? Yes No If yes please explain:

Have you been convicted of a felony or served time in prison within the last ten (10) years? Yes No
Conviction will not necessarily bar you from employment. If yes, please explain:

How/where did you hear about the position for which you are applying? (Check all that apply)

____ Friend or relative _____ Internet _____ Party Perfect employees
____ Newspaper ad _____ Radio ad _____ Website

Other please specify _____

EMPLOYMENT HISTORY

Beginning with your present or most recent employment, list your employment history. Include self-employment, military service, volunteer experience and periods of unemployment. The following sections MUST be completed even if a resume is submitted.

Are you currently employed? Yes No		
Employer	Employed from:	To:
Address:	Supervisor	
Phone	Hours worked/week	Starting salary
Position	Last salary	
Primary duties		
Number of employees supervised by you	May we contact this employer	Supervisor's phone
Reason for leaving		
Employer	Employed from:	To:
Address:	Supervisor	
Phone	Hours worked/week	Starting salary
Position	Last salary	
Primary duties		
Number of employees supervised by you	May we contact this employer	Supervisor's phone
Reason for leaving		
Employer	Employed from:	To:

Address:		Supervisor	
Phone	Hours worked/week	Starting salary	
Position		Last salary	
Primary duties			
Number of employees supervised by you	May we contact this employer		Supervisor's phone
Reason for leaving			
Employer		Employed from:	To:
Address:		Supervisor	
Phone	Hours worked/week	Starting salary	
Position		Last salary	
Primary duties			
Number of employees supervised by you	May we contact this employer		Supervisor's phone
Reason for leaving			
PROFESSIONAL REFERENCES	Please list below any people in addition to supervisors listed above who can responsibly evaluate your work performance		
Please use additional paper if necessary.			
	Name	Place of employment/title	Phone

It is understood and agreed that the foregoing is true to the best of my knowledge, and that my falsification of this application will be grounds for elimination from further consideration. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge.

I authorize Party Perfect to solicit information regarding my character, general reputation, credit, previous employment, and similar background information, and to contact any and all references I have given on my application. I release all parties and persons connected with any such request for information from all claims, liabilities, and damages that may arise out of the furnishing of such information. If employed, I release Party Perfect from any liability for future references it may provide regarding my work history at Party Perfect.

I understand that employment with the Employer is "at-will", which means that either Party Perfect or I can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand, also, that I am required to abide by all rules and regulations of the employer.

Applicant's signature _____ **Date** _____