



**2026 Salem Fair  
Employee Background Verification Form\***

**To be completed by EACH Individual working the 2026 Salem Fair for your company.**

PLEASE PRINT LEGIBLY OR TYPE

**Concession or Exhibitor Name:** \_\_\_\_\_

Individual's Name who will be working: \_\_\_\_\_  
Last First Middle

Street Address: \_\_\_\_\_ Apt /Unit #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's Lic Number: \_\_\_\_\_ State: \_\_\_\_\_

Have you ever been charged and/or convicted of a felony and/or misdemeanor? YES ☐ NO ☐

Have you ever been charged and/or convicted of crime involving a minor child? YES ☐ NO ☐

If yes to either question, please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

The above information is true and correct to the best of my knowledge.

\_\_\_\_\_  
Signature Date Phone

\* Background checks are performed by *Partnership Screening*.

Each Concessionaire / Exhibitor is permitted to have up to **10** background checks at no cost.

**Any requests in excess of 10 per business, OR after June 5 will be charged \$5 each.**

**Forms MUST be submitted by June 5, 2026, or earlier.**

**You MUST attach a photocopy of a current Driver's License, valid ID, or other State/Gov't issued Photo ID. In addition, a head/face/selfie photo must be submitted to be used on your Fair ID badge. The Driver's License photo WILL NOT WORK for this.** Please return the application to the Salem Civic Center Box Office, email [saduffy@salemva.gov](mailto:saduffy@salemva.gov), or fax to 540-375-4011.

*For Office Use only*

Date Rec'd: \_\_\_\_\_ Date provided to PS: \_\_\_\_\_