

Employment Application

*** Covid-19 Vaccination required for employment. Verification of vaccine status required if hired. ***

The Wizard's Chest is an equal opportunity employer. As such we do not discriminate against applicants or employees because of their age, race, color, religion, national origin, sex or on any other basis prohibited or protected by law.

Please Print Clearly						
Name		·	Date			
Current Address (Street)			Social Security Number			
(City) (State)	(Zip)		Cell Phone Number			
Email			Home Phone (if applicable)			
Type of Position Desired						
Position Applied For:	Type of Tosition De	Target Hourly Wage Salary for Position:	·			
☐ Full Time ☐ Part Time ☐ Temporary / S	Seasonal	-				
Days / Hours Available to Work Mon Tues Wed	Thur	Fri S	at Sun			
Have you previously worked for The Wizard's Chest? ☐ Yes ☐ No If yes, when?						
Have you ever been convicted of a crime (misdemeanor or felony)? ☐ Yes ☐ No						
If yes, please explain (where, when, charged / releas	ed):					
(Disclosure of a criminal record will not necessarily disqualify you for employment. Each conviction will be evaluated on its own merits with respect to time, circumstances and seriousness, in relation to the job for which you are applying.)						
Record of Education						
Name and Address of School	Graduated Yes / No	Type of Degree / Diplo Received / Expe				
High School	_					
College or Technical School						
Why would you like to work at the Wizard's Chest?						

Employment History						
1 Name and Addison (CF)		nost recent employer)	D. 22 II.11			
1. Name and Address of Employe	er Reaso	on For Leaving	Position Held			
Phone Number	Dates Employed	(month/year)	Supervisor Name			
()			Supervisor runne			
2. Name and Address of Employe		on For Leaving	Position Held			
Traine and Federess of Employe	rease	in For Bouving	T OBTAIN THEIR			
Phone Number	Dates Employed	(month/year)	Supervisor Name			
	From/		•			
3. Name and Address of Employe	er Reaso	on For Leaving	Position Held			
Phone Number	Dates Employed		Supervisor Name			
()	From /	To/				
<u> </u>						
	Person	al References				
Name	R	elationship	Phone Number			
			()			
			()			
			()			
			()			
List any additional skills, abilities, or interests						
I hereby certify that all statements made in this application are true and correct. I understand that any misrepresentation or omission of						
facts in my application may be grounds for refusal to hire or termination of employment.						
I understand and authorize The Wizard's Chest to contact all past employers, schools, and personal references listed on this						
application to assist in the decision of offering me employment.						
I understand that nothing contained in this employment application or in the granting of an interview is intended to create an						
employment contract for either employment or for the providing of any benefit.						
SignatureDate						
Store Use Only						
Date Application Received Date Interviewed Interviewed By						
Hired □Yes □No □ TBD	Hired □Yes □No □ TBD Application Filed Date					
Available Start Date # Of Days Requested \$ \(\simega \) Nov 2 nd \(\simega \)						
Conflicts With: FanExpo, October Questions?						
Conflicts with FallExpo	, C		Questions: \square			