

Application for Employment

Date:

COSMIC CONNECTIONS

1701 PORTLAND AVENUE
NASHVILLE, TN 37212
615-463-7677

www.yourcosmicconnections.com

Applicant's Information

Name:

Nickname or preferred name:

Address including city, state & zip.

Phone Number(s)

E-Mail:

Cosmic Connections is open daily.

Shifts are 6-8 hours Monday – Saturday, between 9:45am – 8:15pm.
Sunday shifts are 8.5 hours, from 9:45am – 6:15pm

Are there any days / hours you are unable to work on a regular basis due to school, other job, other commitments, etc?

List below.

Work History

Starting with your current or most recent employer, please provide the following information about the last three companies for which you have worked.

Employer 1 (current or most recent)

Company Name _____

Address _____

Dates Employed _____

Job Title(s) Held _____

Job Responsibilities _____

Reason job ended: _____

Name of Immediate Supervisor(s) _____

Can we contact this person? If no, explain why.

Employer 2

Company Name _____

Address _____

Dates Employed _____

Job Title(s) Held _____

Job Responsibilities _____

Reason job ended _____

Name of Immediate Supervisor(s) _____

Can we contact this person? If no, explain why.

Employer 3

Company Name _____

Address _____

Dates Employed _____

Job Title(s) Held _____

Job Responsibilities _____

Reason job ended _____

Name of Immediate Supervisor(s) _____

Can we contact this person? If no, explain why.

List 3 References , Limit of 1 family member or friend.

Name: _____

Phone: _____

Relationship to applicant: _____

Name: _____

Phone: _____

Relationship to applicant: _____

Name: _____

Phone: _____

Relationship to applicant: _____

Applicant Consent

Please carefully read the statements below and initial each one to indicate that you understand and agree to the terms stated. Then sign this form at the bottom.

_____ I certify that all information I have supplied on this form is correct to the best of my knowledge. I understand that omissions or providing deliberate misinformation will disqualify my application and, if hired, would serve as grounds for dismissal.

_____ I give consent to **COSMIC CONNECTIONS** to contact the employers and references listed on this form for my employment references. I authorize these individuals to provide truthful information regarding my employment and previous work experience. In doing so, I waive liability against the employers and individuals contacted as my references, provided the information they supply is honest, factual and given without malice.

Applicant's Signature _____

Company Purposes Only

Interviewer's Signature _____ **Date** _____

Revised March 2019