

**N.H.P.J. Consulting Group,  
Human Capital Management Service Request Form**

Reference is made to our Digital Signatures Policy before signing this form. The completed form can be emailed to us at: [services@nhpj.com](mailto:services@nhpj.com)

**Requestor Information**

Name Position or Title

Company Name Website

Street Address

City State Zip

Telephone E-mail Address

**Service Request Information**

Begin Date	
Location Where Services Are To Be Performed (please provide address)	
List of State (s) Where Other Offices Are Located	
Total Number of Employees In The Company	
Total Number of Executive Vice-Presidents (if applicable)	
Total Number of Managers/Supervisors	
List of Desired Outcomes From The Services That Will Be Provided	

**Authorization/Official Approval (required)**

Name Title

Signature (*handwritten or digital*)

Date of Approval

Telephone