



HENLEY | JOHNSTON & ASSOCIATES

Consistent with the requirements of the Americans with Disability Act (ADA), applicants may request accommodations needed to participate in the application process.

Employment Application

An Equal Opportunity Employer - All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, ancestry or national origin, age, disability status, protected veteran status, or any other characteristic protected by law. In addition, HJA does not discriminate on the basis of physical or mental disability where essential functions of the job, as reasonably accommodated, do not require such distinction. No question on this application is intended to secure information to be used for unlawful purposes.

Applicant Information

Date: _____ Position Applied for: _____

Name: _____
Last First Middle

Address: _____
Street Address Apartment/Unit #
City State Zip Code

Phone Number: _____ Cell Number: _____

Email: _____

Are you eligible to work in the U.S? ___ Yes ___ No Are you on lay-off and subject to recall? _____

Have you ever applied with HJA? _____ If yes, month & year applied? _____

Are you available to work? ___ Full-time ___ Part-time ___ Temporary ___ Seasonal (Summer / Winter)

Can you work overtime, including weekends? _____ Can you travel if the job requires it? _____

Date available to start work: _____ Hourly Rate/Salary desired: \$ _____

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? ___ Yes ___ No

Are you willing to abide by all company policies set forth by HJA? _____

Do any of your friends or family work at HJA? _____ If yes, list names: _____

Have you ever been convicted of, pled guilty or pled no contest to a criminal offense other than a traffic or parking ticket? _____ If yes, explain: _____

Do you have a valid Driver's License? _____ Class: _____ State: _____ #: _____

Have you received more than 3 speeding violations in the past 3 years? _____ If yes, explain: _____

Education

Education	Name and Location of School	Course of Study	No. of Years Completed	Did You Graduate? (Diploma or Degree)
College or University				
Business, Trade or Technical				
High School				

Previous Employment

Start with most recent employer.

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Rate/Salary: \$_____ Ending Rate/Salary: \$_____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Rate/Salary: \$_____ Ending Rate/Salary: \$_____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Rate/Salary: \$ _____ Ending Rate/Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Summarize special skills and certifications: _____

References

Please list three professional references.

Name: _____ Phone: _____

Relationship: _____ Email: _____

How long have you known this person? _____

Name: _____ Phone: _____

Relationship: _____ Email: _____

How long have you known this person? _____

Name: _____ Phone: _____

Relationship: _____ Email: _____

How long have you known this person? _____

Disclaimer and Signature

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Henley-Johnston & Associates, Inc. (HJA) to hire me. If I am hired, I understand that either HJA or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of HJA has the authority to make any assurance to the contrary.

I understand that any offer of employment is conditioned upon a pre-employment physical, drug screening and background check, which includes my driving record. If extended a conditional offer of employment, I consent to undergo all screenings and checks in accordance with HJA policy. I also understand and consent to periodic testing after employment.

In addition, I certify that all of the information in this application or accompanying forms are true and complete. I hereby authorize HJA to investigate all information contained in my application or accompanying forms, and to contact my references and former employers where indicated. I understand that any false information, omissions, or misrepresentations will constitute sufficient cause and reason for the denial of employment or immediate termination.

Signature

Date

References Checked:

Person Contacted: _____

Results: _____

Person Contacted: _____

Results: _____

Person Contacted: _____

Results: _____

Interview Results:

Hire Date: _____

Pay Rate/Salary: \$ _____

Notes: