

LawResources

1140 Connecticut Avenue, NW
Suite 675
Washington, DC 20036
(202) 371-1270

APPLICATION FOR TEMPORARY PLACEMENT

Personal Data

Name (last, first, middle)		Date
Social Security Number	Can you provide proof of U.S. Citizenship? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Address		
City	State	Zip Code
Home Phone ()	Work Phone ()	
Answering Machine Y or N	Pager Number ()	
Referred by	Interviewed by	

Skills

Please indicate skills acquired & software version where applicable.

Typing Speed _____	Shorthand/Fastnotes: (speed) _____	Dictaphone _____
WordPerfect 5.1 for: <input type="checkbox"/> DOS <input type="checkbox"/> Windows <input type="checkbox"/> Macintosh	WordPerfect 6.0 for: <input type="checkbox"/> DOS <input type="checkbox"/> Windows <input type="checkbox"/> Macintosh	
Microsoft Word for DOS _____, for Windows _____, for Mac _____		
Ami Pro _____		
Lotus 1-2-3 _____	Excel _____	Quattro Pro _____ Other Sprdshts. _____
Harvard Graphics _____	Other Graphics Pkgs. _____	
PC Docs _____	Soft Solutions _____	Other Doc. Mgrs. _____
Full Authorities _____	Citewrite _____	CompareWrite _____
Calendar Pkgs. _____	Rolodex Pkgs. _____	
Timeslips _____	Other Billing Pkgs. _____	
Other Software Pkgs. _____		

Status (LawResources use only)

Date	Date	Date
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Employment History

Begin with most recent employer. Please indicate month and year each position began and ended.

1. Employer	Dates of employment	
Address		
City	State	Zip code
Phone ()	Beginning salary	Ending salary
Title/duties		
Why did you leave?		
Supervisor's name / Title	May we contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Employer	Dates of employment	
Address		
City	State	Zip code
Phone ()	Beginning salary	Ending salary
Title/duties		
Why did you leave?		
Supervisor's name / Title	May we contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	

3. Employer	Dates of employment	
Address		
City	State	Zip code
Phone ()	Beginning salary	Ending salary
Title/duties		
Why did you leave?		
Supervisor's name / Title	May we contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Educational Background

High School	_____	Year Graduated	_____
College	_____ Degree _____	Year Graduated	_____
Other	_____		

References (Persons you have supported and/or co-workers)

Name	Firm	Telephone #	Relationship
1.			
2.			
3.			
4.			

Are you awaiting or considering an offer from another law firm or corporation? Yes No

If yes, from which firm: _____ Would you accept a counteroffer from your current employer? Yes No

Your signature below will authorize *LawResources* to confirm your college degree and check the references you have supplied:

Applicant's Signature Date