

CANDIDATE APPLICATION FORM

I. CANDIDATE INFORMATION				
Last Name (Please Print)		First	M.I.	Date:
Home Phone	Work	Cell	E-mail Address	
Street Address				Apt. #
City		State	Zip Code	

II. SUPPORTING INFORMATION									
Type of Employment:					Salary Desired:				
Temporary		Temp-to-Hire		Direct	Temp/Hourly:			Full Time/Salary:	
Education:	High School	College	Master's	JD	Degree:				GPA:
Are you a citizen of the U.S.?			Yes	No	If no, are you authorized to work in the U.S.?			Yes	No
Types of Position interested in:					Are you able to commit to a full time permanent position for a minimum of two years?			Yes	No
1.					If no, explain:				
2.									
3.					Available Date:	Do you have any time off scheduled in the next year?			
Preferred Hours					Willing to go to:	N. Va?	Georgetown?	DC?	Metro Only
8:30-5:00	9:00-5:30		9:30-6:00			Yes	Yes	Yes	Non-Metro (car)
					No	No	No	Both	
Language Skills:	Spanish	Read	Other:	Read	Other:	Read		How did you hear about us?	
		Write		Write		Write			
		Speak		Speak		Speak			
Please rate the following on a scale of 1-10 (1 poor, 10-excellent)									
How well do you work for demanding people?			How are your organizational skills?			Your punctuality?			
To avoid duplicating your job search, please list companies you have contacted on your own or through some other source:									
Select your 5 greatest strengths:									
Ability to prioritize	Self-Motivated	Follows Directions	Positive Attitude	Multitasking	Punctuality				
Client Interaction	Team Player	Detail-Oriented	Initiative	Reliability	Organization Skills				
Flexibility	Customer Service Skills	Computer Skills							

III. SOFTWARE SKILLS			
Please check experience in the following software programs and how long you have worked with them:			
COMPUTER SOFTWARE			
MS Word	Access	PowerPoint	Excel
Styles	TOC	TOA	Outlook

LEGAL SOFTWARE

iManage	LegalKEY	Carpe Diem	Kroll
Concordance	Westlaw	Relativity	Ringtail
Summation	LexisNexis	CPI	PATTSY

ACCOUNTING SOFTWARE

ADP	Quickbooks	Elite	
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Please list all other software programs and special skills or training:

IV. LEGAL SKILLS

Please check experience in the following software programs and level of expertise:

ADMINISTRATIVE SKILLS

Shorthand	Dictation	Fast Notes	Dictaphone
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LEGAL SKILLS

Bluebooking	Cite Checking	Shepardizing	Discovery	Document Production
Privilege Review	Privilege Log	Trial Preparation	Trial Experience	Document Coding
Bates Numbering	Foreign Filing	E-filing	Pleadings Index	Docketing

Please list all other software programs and special skills or training:

V. LEGAL EXPERIENCE

Areas of law you prefer or are interested in gaining experience in:

Areas of law you do not like?

Particular firms you are interested in?

Particular firms you are not interested in working for?

Firm size preference

Small	Medium	Large
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Please check areas of law experience:

Med. Malpractice	Administrative	Litigation	Patent
Intellectual Prop.	Immigration	Real Estate	Energy
Labor/Employment	Bankruptcy	Construction	Banking
Telecommunication	Mergers/Acq.	Trademark	Tax
Corporate	Estates/Trusts	Food & Drug	Health
Personal Injury	Gov't Contracts	Antitrust	Environmental

Other law areas:

VI. PREVIOUS EMPLOYMENT

Present/Last Position-please include salary information

Dates Employed		Position	Company/Firm Name
From (Mo./Yr.)	To		
Starting Salary	Ending Salary	Supervisor	Address
Overtime Salary	Next Raise	Supervisor's Position	Phone Number
Were you terminated?	Reason for Leaving	Number of People in Company/ Number Supervised	Type of Business
Yes No			

Previous Position

Dates Employed		Position	Company/Firm Name
From (Mo./Yr.)	To		
Starting Salary	Ending Salary	Supervisor	Address
Overtime Salary	Next Raise	Supervisor's Position	Phone Number
Were you terminated?	Reason for Leaving	Number of People in Company/ Number Supervised	Type of Business
Yes No			

Previous Position

Dates Employed		Position	Company/Firm Name
From (Mo./Yr.)	To		
Starting Salary	Ending Salary	Supervisor	Address
Overtime Salary	Next Raise	Supervisor's Position	Phone Number
Were you terminated?	Reason for Leaving	Number of People in Company/ Number Supervised	Type of Business
Yes No			

VII. DISCLAIMER & SIGNATURE

PLEASE READ CAREFULLY

It is our policy to make referrals of employment candidates to employers based on merit only. Our selection process is not influenced by race, sex, religion, color, age, or national origin. I agree to the policy of conducting background reference check and understand that under the Fair Credit Reporting Act I have the right to a disclosure of the nature and substance of any background investigation.

Signature: _____

Date: _____

Emergency Contact Information:

Contact Name:	Phone:	Relationship:
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ATTORNEY BARRED CERTIFICATION

Name: _____

Date: _____

State Barred: _____ Bar #: _____

Active

Inactive

State Barred: _____ Bar #: _____

Active

Inactive

State Barred: _____ Bar #: _____

Active

Inactive

Confirmed by PLS staff _____ Date _____

REFERENCE REQUEST

Please provide the names of former supervisors who can provide information about your work ability and experience. Please do not include peers, co-workers, or relatives.

Reference 1:

Contact Name & Title

Company Name

_____ Phone Number

_____ Email/Fax

Employed from _____ to _____

Reference 2:

Contact Name & Title

Company Name

_____ Phone Number

_____ Email/Fax

Employed from _____ to _____

Reference 3:

Contact Name & Title

Company Name

_____ Phone Number

_____ Email/Fax

Employed from _____ to _____

I, _____ (Applicant Name), authorize you to furnish Palmer Staffing Services with my employment record and any additional information about my job history and performance that may enable Palmer Staffing Services to determine my employment qualifications. I hereby release both you and Palmer Staffing Services from any and all liability for any damage that results from the disclosure of this information.

Applicant Signature