



**Legal  
Placements  
Incorporated**

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SUBMITTED USING ANY COMPUTER, TABLET OR  
MOBILE DEVICE.



# IMPORTANT

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Step: 1 of 3

<p><b>Adobe Acrobat Reader DC</b></p> <p>Version 2015.002.00123 System requirements</p> <p>Your system: Mac OS (Intel) 10.8.1 10.16, English</p> <p>Do you wish a different language or operating system? Are you an IT manager or OEM?</p>	<p><b>Optional offer:</b></p> <p>You may want to try the free Lightroom 8 trial and learn how to make great photos great. Add it to my selection.</p> <p>Learn more</p>	<p><b>Terms &amp; conditions:</b></p> <p>By clicking the "Install now" button, you agree to the automatic installation of optional Adobe Acrobat Reader DC, and to the Adobe Software Licensing Agreement.</p> <p>Note: Your antivirus software must allow you to install software.</p> <p><b>Install now</b></p> <p>Free trial: 30-day</p>
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ON MOBILE DEVICES





Bar Status				
State Barred In	Active	In-Active	Date of Admission	Bar Number
1.				
2.				
3.				

**Employment History**

NOTE: Your application will not be considered unless every question in this section is answered. Since we will make every effort to contact previous employers, the correct telephone numbers of past employers is critical. Also please explain any gaps in your employment history.

**Most Recent Employer**

Are you currently working for this employer? Yes  No   
 If yes, may we contact? Yes  No

\_\_\_\_\_  
 Company Name City State Telephone ( ) Fax ( )

Dates Employed From: \_\_\_\_\_ To: \_\_\_\_\_ Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Description of work performed: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**Second Most Recent Employer**

Are you currently working for this employer? Yes  No   
 If yes, may we contact? Yes  No

\_\_\_\_\_  
 Company Name City State Telephone ( ) Fax ( )

Dates Employed From: \_\_\_\_\_ To: \_\_\_\_\_ Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Description of work performed: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**Third Most Recent Employer**

Are you currently working for this employer? Yes  No   
 If yes, may we contact? Yes  No

\_\_\_\_\_  
 Company Name City State Telephone ( ) Fax ( )

Dates Employed From: \_\_\_\_\_ To: \_\_\_\_\_ Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Description of work performed: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

## Prior Temporary Assignment History

As part of our ongoing efforts to provide you with the best assignments possible, please list any companies and law firms that you have worked as a temporary at over the past year (this list does not include the name of agencies which you have worked through).

Company Name	Length of The Assignment	
1.	Weeks:	Months:
2.	Weeks:	Months:
3.	Weeks:	Months:
4.	Weeks:	Months:
5.	Weeks:	Months:

## Skills Profile

What do you consider your strongest administrative/technical skill(s)? How many years of experience do you have with each? Please list all software and database (MSWord, WordPerfect, Summation, Concordance, etc.) experience as well as legal work experience, (i.e., cite checking, depositions, Lexis, Westlaw, trial prep, document production, etc.).

Skill:	Years Experience:
Skill:	Years Experience:
Skill:	Years Experience:
Have you prepared for and / or assisted at trial? Yes: <input type="checkbox"/> No: <input type="checkbox"/>	If yes, how many times?

## Emergency Contact Information

Please provide emergency contact information. This information will be kept confidential and will only be used in the event of an emergency.

Contact Name and Number	Relationship to Applicant

**EEOC Statement:** Legal Placements Inc., is fully committed to Equal Employment Opportunity, and to attracting the most qualified applicants without regard to their race, gender, color, religion, sexual orientation, national origin, age, physical or mental disability, citizenship status, veteran status, or any other characteristic prohibited by state or local law. We are dedicated to providing a work environment free from discrimination and harassment, and where employees are treated with respect and dignity. When a conflict occurs, the company promptly addresses the matter. Should an employee feel they have been unfairly treated, they should report the matter to their LPI Recruiter or the Human Resources Representative.

**AUTHORIZATION:** I \_\_\_\_\_, the undersigned applicant for employment, authorize Legal Placements, Inc., to assist me in securing employment and to conduct reference checks which may include employment records, general reputation, personal characteristics, and a criminal background check. Additionally I understand that if I am applying for a position relating to finance in anyway, under the Fair Credit Reporting Act, I have the right to request a copy of the credit report. I further understand that all additional completed documents, references and material remains the sole property of LPI and ITP and it is their policy not to release this information unless under request of legal matters. I release Legal Placements, Inc. of any liability associated with checking my references. Legal Placements, Inc. further has my permission to distribute my resume to their clients. Should a client offer me employment of any type within a year period of my initial interview, I will notify Legal Placements, Inc.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date



## Reference Request Information

*Please Complete All Sections*

Below 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.**

<hr/> Name and Title		
<hr/> Firm / Company Name		
<hr/> Contact Information	<hr/> Telephone	<hr/> Email:
<hr/> Name and Title		
<hr/> Firm / Company Name		
<hr/> Contact Information	<hr/> Telephone	<hr/> Email:
<hr/> Name and Title		
<hr/> Firm / Company Name		
<hr/> Contact Information	<hr/> Telephone	<hr/> Email:

### Authorization to Release Information

I \_\_\_\_\_ (print full name), authorize you to furnish Legal Placements Inc., or Information Technology Placements any information pertaining to my prior employment record and any additional information about my employment history, salary information and performance that may enable LPI or ITP to determine my employment qualifications. I hereby release both you and Legal Placements Inc. or Information Technology Placements from any and all liability for any damage that may result from the disclosure of this information.

\_\_\_\_\_

**Applicant's Signature**

**Date**