

**EMPLOYMENT AGENCY / EXECUTIVE RECRUITERS SUPPLEMENT**

1. Name of Applicant:

2. Please indicate the percentage of the Applicant's revenues for the past 12 months from each activity:

Traditional employment agency:	_____ %	Contingency/Executive search	_____ %
Temporary help placement	_____ %	Career counseling	_____ %
Outplacement	_____ %	Retained search	_____ %
		Other: _____	_____ %
		<b>Total must equal 100%</b>	<b>100 %</b>

3. Please indicate the percentage of types of professionals placed in the past 12 months:

Advertising Profession	_____ %	Computer Profession	_____ %	Insurance Profession	_____ %
Architect & Engineers	_____ %	Consultants	_____ %	Land Surveyors	_____ %
Attorneys	_____ %	Dentists	_____ %	Mortgage Brokers	_____ %
Accountants/CPAs	_____ %	Financial Advisor	_____ %	Physicians/Surgeons	_____ %
Bookkeepers	_____ %	Interior Designers	_____ %	Real Estate Profession	_____ %
		Other _____	_____ %	<b>Total must equal 100%</b>	<b>100 %</b>

4. For professionals that are placed on a temporary or permanent basis, does the Applicant require that they maintain individual professional liability insurance? .....  Yes  No

5. Are any tests administered to job applicants? .....  Yes  No  
*If "yes", please provide a detailed description including the types of testing and details of their administration.*

6. Does the Applicant provide an Employee Leasing service? .....  Yes  No

7. Please describe the specific steps and procedures in which the Applicant takes to investigate and verify the backgrounds, qualifications and credentials of job candidates.

8. What steps does the Applicant take to protect a job candidates' confidential information from being released to an unauthorized party?

9. Is worker's compensation insurance currently in force? .....  Yes  No

10. Are all temporary employees covered under this insurance? .....  Yes  No

**NOTICE**

I understand that the information submitted herein becomes a part of my professional liability application and is subject to the same warranty and conditions. Must be signed and dated by an Owner, Partner or Principal as duly authorized on behalf of the Applicant.

\_\_\_\_\_  
Signature of Owner, Partner or Principal

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date