

INFORMATION SHEET (NON-ATTORNEY)

Please answer all questions on this Information Sheet. **DO NOT indicate "See Resume."**

Thank you for your interest in being considered for a position with My Paralegal Service. My Paralegal Service contracts Paralegals to its its clients without discrimination on any basis prohibited by law, including race, color, religion, sex, national origin, age, disability, handicap, marital status or veteran status, or any other legally protected status. No question on this information sheet is used for the purpose of limiting or excluding any candidate from consideration by a client for employment on any basis prohibited by local, state, or federal law. Certain information provided will be shared with My Paralegal Service clients.

Personal Information

Last Name:	First Name:	Middle Name:
Street Address/Apt #:		
City:	State:	Zip:
Home Telephone #:	Work Telephone #:	Alternate Telephone #:
Home Fax #:		Cellular Phone #:
E-Mail Address:		

Social Security Number (to verify employment and education) _____

Have you ever used another name? If yes, please provide. _____

If hired, can you present proof of your legal right to work in the U.S.? Yes No

Position Information

How did you learn about My Paralegal Website?

- | | |
|--|---|
| <input type="checkbox"/> Referred By _____ | <input type="checkbox"/> Newspaper _____ |
| <input type="checkbox"/> Trade Journal _____ | <input type="checkbox"/> School/College _____ |
| <input type="checkbox"/> MPS Web Site | <input type="checkbox"/> Web Job Board |
| | <input type="checkbox"/> Other _____ |

Have you ever filed an application with us before? Yes No If Yes, give date and city: _____

Have you ever been employed with us before? Yes No If Yes, give date and city: _____

Specify Position Requested: _____ Date Available for Employment: _____

Type of position sought: Full-Time Salary Full-Time Hourly Part-Time Hourly Hours Requested: _____

Employment Experience

Please list your employment history below starting with your current or most recent job. *(Please include any temporary work.)*

Date		Show Current or Most Recent Position First	Describe Your Duties
From Mo. Yr.	To Mo. Yr.	Company Name _____ Job Title _____ Address _____ City _____ State _____ Zip Cod _____ Phone Number _____ Alt. Number _____ Supervisor _____ Salary: Starting: \$ _____ Ending: \$ _____	
Reason For Leaving			
From Mo. Yr.	To Mo. Yr.	Company Name _____ Job Title _____ Address _____ City _____ State _____ Zip Cod _____ Phone Number _____ Alt. Number _____ Supervisor _____ Salary: Starting: \$ _____ Ending: \$ _____	
Reason For Leaving			
From Mo. Yr.	To Mo. Yr.	Company Name _____ Job Title _____ Address _____ City _____ State _____ Zip Cod _____ Phone Number _____ Alt. Number _____ Supervisor _____ Salary: Starting: \$ _____ Ending: \$ _____	
Reason For Leaving			
From Mo. Yr.	To Mo. Yr.	Company Name _____ Job Title _____ Address _____ City _____ State _____ Zip Cod _____ Phone Number _____ Alt. Number _____ Supervisor _____ Salary: Starting: \$ _____ Ending: \$ _____	
Reason For Leaving			
From Mo. Yr.	To Mo. Yr.	Company Name _____ Job Title _____ Address _____ City _____ State _____ Zip Cod _____ Phone Number _____ Alt. Number _____ Supervisor _____ Salary: Starting: \$ _____ Ending: \$ _____	
Reason For Leaving			

Educational Data

School	Print Name, City, State and Campus (if more than 1 location) for each School	Last Year Completed	List Diploma or Degree Received	Major/Minor Course of Study	GPA/Class Rank
High School		<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4			
College		<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4			
Graduate School		<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4			
Technical or Business School		<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4			
Professional Certification(s)					
Other					

References

May we contact your current employer? Yes No N/A

Please provide three professional references:

Name	Title	Company	Relationship	Phone Number

Additional Background Information

Please explain any gaps in your employment history _____

Have you received any written reprimands or disciplinary suspensions during any previous employment? Yes No

If yes, explain _____

Have you ever been discharged or asked to resign? Yes No

If yes, explain _____

Summarize special job-related skills, licenses, and qualifications acquired from employment or other experience:

Language Skills: Indicate any foreign languages you speak, read and/or write.

	Fluent	Good	Fair
Speak			
Read			
Write			

Computer Skills: Indicate any computer program, software and/or database experience.

	Basic Knowledge	Working Knowledge	Very Proficient
1.			
2.			
3.			
4.			
5.			
6.			

If required for the job you are seeking, do you type? Yes No

Approximate speed: _____WPM

Certification, Authorization and Release

I hereby certify that all of the facts and information I have provided to **MY PARALEGAL SERVICE**, including those contained in my resume are true and complete. If any of the information provided changes, I will notify **MY PARALEGAL SERVICE** immediately of such changes.

I hereby authorize **MY PARALEGAL SERVICE** to investigate all facts and information provided in this Direct Hire Information Sheet and to interview or make inquiries of the references, educational institutions, licensing bodies, and previous employers listed in this Direct Hire Information Sheet or identified by me. I authorize these references, educational institutions, licensing bodies, and previous employers to give **MY PARALEGAL SERVICE** all the facts, opinions, and evaluations concerning my previous employment and any other information they may have, personal or otherwise, and release all such parties from any liability which may allegedly arise from furnishing such information to **MY PARALEGAL SERVICE**, including, but not limited to, any liability for defamation or invasion of privacy.

I further consent to **MY PARALEGAL SERVICE'S** providing information obtained from my references, educational institutions, licensing bodies, and previous employers to potential employers on my behalf, and release **MY PARALEGAL SERVICE** from any liability which may allegedly arise from furnishing such information to potential employers, including, but not limited to, any liability for defamation or invasion of privacy.

I understand that **MY PARALEGAL SERVICE** generally enters into separate agreements with each of its clients and that these agreements, among other things, typically restrict such clients from directly or indirectly employing or retaining a person to whom they have been introduced by **MY PARALEGAL SERVICE**, unless and until either an agreed upon fee is paid to **MY PARALEGAL SERVICE**, or a period of time up to (12) months has passed since such person last worked for the client or was referred to the client. **I agree not to independently contact, accept employment with, or establish any other type of employment or work-referral relationship with any client whose name (or information sufficient for a reasonable person to determine such identity) has been revealed to me or to whom I have been referred by MY PARALEGAL SERVICE within the (12) month period immediately following any referral or placement through MY PARALEGAL SERVICE. I also agree that if independently contacted by a client to whom I have been previously referred by MY PARALEGAL SERVICE within the (12) month period, I will immediately notify MY PARALEGAL SERVICE.**

I understand that "**MY PARALEGAL SERVICE**" shall include, collectively, **MY PARALEGAL SERVICE, Inc.**, its parent companies, and each of their affiliated companies and subsidiaries, as well as each of their directors, employees, officers, and agents of the foregoing companies. "I" shall be deemed to be the undersigned candidate.

I certify that I have read, understand, and agree to the above.

Signature

Print Name

Date