

MISCELLANEOUS PROFESSIONAL LIABILITY INSURANCE

SUPPLEMENTAL APPLICATION – EMPLOYMENT / PLACEMENT AGENCY

1. Name of Applicant: _____

2. Indicate the approximate percentage of revenue derived from each of the following (total must be 100%):

Service	Percentage	Number Per Year
Permanent placements	%	
Temporary placements	%	

3. With respect to the temporary placements, are the individuals placed (total must be 100%):

Service	Percentage
Independent contractors	%
The Applicant's employees	%

4. Types of placements (total must be 100%):

Position	Permanent Placements	Temporary Placements
Clerical / Office	%	%
Construction	%	%
Doctors / Nurses	%	%
Driving / Trucking	%	%
Educational / Teaching	%	%
Engineers / Architects	%	%
Executives / Officers	%	%
Labourer (describe): _____	%	%
Licensed Professionals	%	%
Other: _____	%	%

5. Does the Applicant administer job tests to applicants? Yes No

If Yes, provide full details: _____

6. To complete the Application, attach the following items:

- Sample contract / written agreement between the Applicant and employer;
- Time card, including all conditional wording (for temporary placements only); and
- Promotional material / brochures / advertisements used by the Applicant.

This Employment / Placement Agency Supplemental Application is attached to and forms part of the Miscellaneous Professional Liability Insurance Application. It is subject to the same provisions concerning representations made as in the basic Application.

Signature of Applicant	Date
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