# FORM 3

### UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

#### INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB APPROVAL					
OMB	3235-				
Number:	0104				
Estimated average					
burden hours per	r				
response	0.5				

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)											
1. Name and Address of Reporting					3. Issuer Name and Ticker or Trading Symbol						
Person *		Statement (Month/Day/Year)		GEN]	GENERAL EMPLOYMENT ENTERPRISES INC [JOB]						
Gallagher Katy M			:)								
(Last) (First) (Mid	dle)	08/31/2011		4. Rela	4. Relationship of Reporting			5. If Amendment, Date Original			
C/O GENERAL EMPLOYM	ENT				Person(s) to Issuer			Filed(Month/Day/Year)			
ENTERPRISES, INC., ONE					Check all irector	applicable) 10% Own					
TOWER LANE, SUITE 2200	0				officer (give	Other (spe					
(Street)				title belo		below) P Prof. Staffi	6. Indivi	dual or Joint/0	Group		
				VP	oper. & v	P Prof. Staffi	Filling(Ci	neck Applicable Li			
OAKBROOK								filed by One Reportled by More than			
TERRACE, IL 60181							Person				
(City) (State) (Z	ip)	Tal	ble I -	Non-De	rivative	Securities	Beneficially	Owned			
1. Title of Security		2. A	Amount	of Securi	ties 3.	4.	. Nature of Inc	lirect Benefici	al		
(Instr. 4)				y Owned			wnership				
		(Ins	str. 4)			orm: Direct (I	nstr. 5)				
						direct (I)					
						nstr. 5)					
	no respond t d to respond	l unless th	ne forn	n display	/s a curr	ently valid (	OMB control	I			
1. Title of Derivative Security	2. Date Exer			e and Am		4.	5.	6. Nature of Indir			
(Instr. 4)	and Expirati			ties Unde		Conversion	Ownership	Beneficial Ownership			
	(Month/Day/Year) Derivative Security		rity	or Exercise	Form of	(Instr. 5)					
		T	(Instr.	4)		Price of	Derivative				
	Date	Expiration					Security: Direct (D)				
	Exercisable	Date	Title	Amount of	r Number	Security	or Indirect				
				of Shares			(I)				
							(Instr. 5)				
<b>Reporting Owner</b>	s										
Reporting Owner Name / Address			Relationships								
		Director	10% Ow	% Owner Officer Other							
Gallagher Katy M											
	ENT ENTE	RPRISES	INC								
C/O GENERAL EMPLOYMENT ENTERPRISES, INC. ONE TOWER LANE, SUITE 2200						VP Op	er. & VP Pr	of. Staffing			
OAKBROOK TERRACE II											

## Signatures

/s/ Katy M. Gallagher	09/12/2011
**Signature of Reporting Person	Date

### **Explanation of Responses:**

#### No securities are beneficially owned

- \* If the form is filed by more than one reporting person, see Instruction 5(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.