# FORM 3

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

Washington, D.C. 20549

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

OMB APPROV	/AL
OMB	3235-
Number:	0104
Estimated averag	e
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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 Reportin Person * HEINEMAN RONALD E	Staten (Mont	2. Date of Event Re Statement (Month/Day/Year) — 07/01/2009		Requiring 3. Issuer Name and Ticker or Trading Symbol GENERAL EMPLOYMENT ENTERPRISES INC [JOB]				
(Last) (First) (Mic ONE TOWER LANE, SUIT 2200	ddle)			4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owne			5. If Amendment, Date Original Filed(Month/Day/Year)	
OAKBROOK, IL 60181				X Officer (gi		specify 6. Increment 6. Increme	dividual or Joint/Group g(Check Applicable Line) orm filed by One Reporting Person orm filed by More than One Reporting	
(City) (State) (Z	Zip)	Tal	ble I	- Non-Derivati	ve Securitie	s Beneficia	ally Owned	
	ho respond t	Ben (Ins	ies ber	nt of Securities Ily Owned neficially owned d n of information rm displays a cu	contained i	Ownership (Instr. 5) rectly.		
number.								
Table II - Derivative	Securities Ber	neficially O	wned	(e.g., puts, calls,	warrants, opti	ions, conver	tible securities)	
(Instr. 4) and I		Expiration Date h/Day/Year)		tle and Amount of rities Underlying vative Security r. 4)	4. Conversion or Exercise Price of	Form of Derivative	(Instr. 5)	
	Date Exercisable	Expiration Date	Title	Amount or Numb of Shares	Derivative Security	Security: Direct (Dor Indirect (I) (Instr. 5)	O) ct	
Reporting Owner	's							

Reporting Owner Name / Address	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
HEINEMAN RONALD E ONE TOWER LANE SUITE 2200 OAKBROOK, IL 60181			Chief Executive Officer		

## **Signatures**

Ronald E. Heineman	07/20/2009
**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.