ZIZZA SALVATORE J Form 3 January 06, 2010 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and A Person <u>*</u> ZIZZA S			2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol GENERAL EMPLOYMENT ENTERPRISES INC [JOB]						
(Last)	(First)	(Middle)	12/23/2009	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)			
614 LEXIN NEW YOR	(Street)			Director X Officer (give title below	all applicable) 10% Other w) (specify bel- xecutive Office	Owner r ow)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table I - N	Non-Derivat	on-Derivative Securities Beneficially Owned					
1.Title of Secu (Instr. 4)	ırity		2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr	*			
None			0		D	Â				
Reminder: Rep owned directly			ach class of securities benefic	^{ially} S	EC 1473 (7-02	2)				
	inforı requi	mation cont red to respo	pond to the collection of ained in this form are not ond unless the form displ MB control number.	t						
	Table II - De	rivative Secu	rities Beneficially Owned (e	e.g., puts, calls,	warrants, op	tions, c	convertible securities)			
					a	_	<pre>/</pre>			

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	Ownership	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date		Amount or Number of	Derivative Security	Security: Direct (D) or Indirect	

OMB Number: 3235-0104 Expires: January 31, 2005 Estimated average burden hours per response... 0.5

Shares

(I) (Ins

(I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
ZIZZA SALVATORE J 614 LEXINGTON AVENUE NEW YORK, NY 10022	Â	Â	Chief Executive Officer	Â			
Signatures							
/s/ Salvatore J. Zizza 12/2	29/2009						
**Signature of Reporting Person	Date						
Evolopation of De							

Explanation of Responses:

* 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.