#### DEPARTMENT OF HEALTH SERVICES

F-82006 (05/2015)

County Code(s)

## **EMPLOYMENT APPLICATION SUPPLEMENT**

### AN EQUAL OPPORTUNITY EMPLOYER FUNCTIONING UNDER AN AFFIRMATIVE ACTION PLAN

**Instructions:** A copy of all Employment Application Supplement forms marked LTE (limited-term employee) or Project should be sent to the Department of Health Services, Affirmative Action/Civil Rights Office, 1 West Wilson Street, P O Box 7850, Madison WI 53707-7850.

Application Date	Position Title										
Name – Applicant (prin	t clearly)										
Daytime Telephone Number Nighttime				Telephone Number			Other Telephone Number				
Mailing Address – Stre	et / PO Box / Rui	ral Route									
City							State	Zip Code +4			
Are you a Wisconsin re	esident? 🗌 Ye	es 🗌 N	lo (Wisco	nsin resider	ncy is requi	red for LTE a	nd project en	nployment.)			
Date Available for Emp			-	nt Preferenc			Shift Prefe	· · · · · · · · · · · · · · · · · · ·			
		[	Full Tim	e 🗌 F	Part Time		First	Second Third		ď	
Are you currently legall	y authorized to v	vork in the	United Sta	ates?				🗌 Yes	🗌 No		
Will you now, or in the	future, require sp	onsorship	for emplo	yment visa	status (e.g	., H-1B visa s	tatus)?	🗌 Yes	🗌 No		
In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required Employment Eligibility Verification form (Form I-9) upon hire.											
Do you have a valid Wisconsin driver's license or eligibility to obtain one?							🗌 Yes	🗌 No			
If a job requires, would	you be able to tr	avel?						🗌 Yes	🗌 No		
Have you ever been employed with the state of Wisconsin?						🗌 Yes	🗌 No				
If yes, please prov	ide the dates <b>an</b>	d where y	ou were er	nployed:							
			EC		I / TRAIN	ING					
Formal Education / Training Beyond High School Dates Attended											
Organization – Name and Location				From	То	Major / Mil	nor Field(s)	Degree	;	Year	
			005								
SPECIAL QUALIFICATIONS Foreign Language(s) – List Language Verbal Written Current License / Registration Memberships – List Name(s) of Professional /											
Skills(s)					nical Assoc						
Other Skills / Qualifications (Include typing, office skills, technical vocabulary, etc.)											
Geographic Location(s	Vou Will Consid	ler for Em	nlovment								

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#### **EMPLOYMENT HISTORY**

Page 2 of 3

This section must be completed	even if vo	ou supply a	resume. List all employment chronologically beginning with present or most recent
			rs. Include any part-time, internship, or volunteer work experience. Please provide
			<b>ory.</b> If necessary, attach additional sheets using the format below to provide additional
employment data or references. R	eferences		may be contacted in addition to any others the employer deems necessary. Please
verify that daytime number listed is	accurate.		
Name – Employer			Duties / Responsibilities
Street Address			
City	State	Zip Code	
ony	olulo	210 0000	
Position held			
Position neid			
Supervisor (Reference)	lelepho	ne Number	
Dates of Employment			
Hours Per Week			
Full Time Part Time	Voluntee	r	
Name – Employer			Duties / Responsibilities
Street Address			
Street Address			
0.1	01-11-	7: 0.1	
City	State	Zip Code	
			•
Position held			
Supervisor (Reference)	Telepho	ne Number	
Dates of Employment			
Hours Per Week			
Full Time Part Time	Voluntee	r	
Name – Employer		-	Duties / Responsibilities
Street Address			
	-		•
City	State	Zip Code	
Position held			
Supervisor (Reference)	Telepho	ne Number	
Dates of Employment			
Dates of Employment			
Hours Dor Wook			4
Hours Per Week	Valuet	_	
Full Time Part Time	Voluntee	1	

If one of the references you've provided would know you by a different name, please indicate that name:

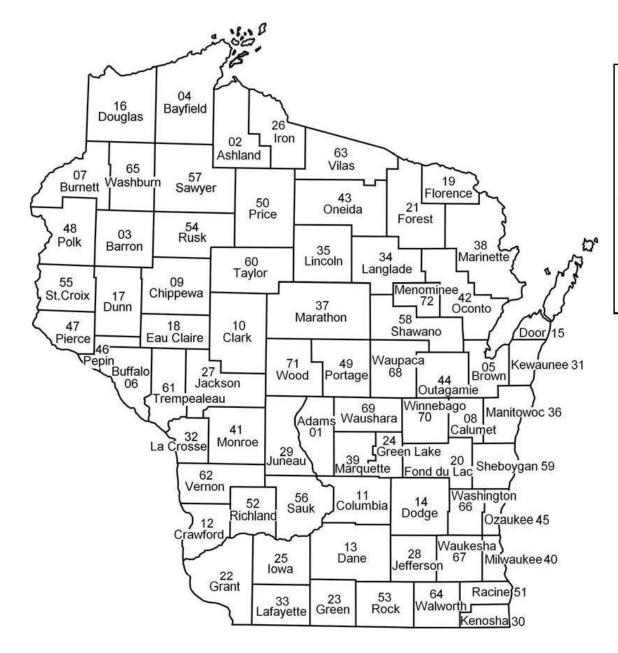
I understand that all the information on this application is true and complete to the best of my knowledge and that any false or missing job related information may disqualify me for this position.

SIGNATURE – Applicant	Date Signed

#### COUNTIES WHERE YOU WILL ACCEPT EMPLOYMENT (PLEASE NOTE THAT COUNTY CODES HAVE CHANGED.)

At least one code is required to process your application. Select the desired code(s) below for the county(ies) where you will accept work and transfer that 2-digit number to the County Code section at the bottom of page 1 of this application. We will only consider you for jobs in the locations you indicate on your application.

Code 00 - 01 - 02 - 03 - 04 - 05 - 06 - 07 - 08 - 09 - 10 - 11 - 12 -	County All Counties Adams Ashland Barron Bayfield Brown Buffalo Burnett Calumet Chippewa Clark Columbia Crawford	Code 15 - 16 - 17 - 18 - 20 - 21 - 22 - 23 - 24 - 25 - 26 - 27 -	County Door Douglas Dunn Eau Claire Florence Fond du Lac Forest Grant Green Green Lake Iowa Iron Jackson	Code 30 - 31 - 32 - 33 - 34 - 35 - 36 - 37 - 38 - 39 - 72 - 40 - 41 -	County Kenosha Kewaunee La Crosse Lafayette Langlade Lincoln Manitowoc Marathon Marinette Marquette Menominee Milwaukee Monroe	Code 44 - 45 - 46 - 47 - 48 - 49 - 50 - 51 - 52 - 53 - 54 - 55 - 56 -	County Outagamie Ozaukee Pepin Pierce Polk Portage Price Racine Richland Rock Rusk St. Croix Sauk	Code 59 - 60 - 61 - 62 - 63 - 64 - 65 - 66 - 67 - 68 - 69 - 70 - 71 -	County Sheboygan Taylor Trempealeau Vernon Vilas Walworth Washburn Washburn Washington Waukesha Waupaca Waushara Winnebago Wood
10 —	Clark	25 –	lowa	72 –	Menominee	54 –	Rusk	69 –	Waushara



# <u>Cities with population of</u> more than 100,000:

- Madison (state capital) is in Dane County, code 13
- Milwaukee (largest city) is in Milwaukee County, code 40
- Green Bay is in Brown County, code 05