

Alice in Dairyland Application

Complete all items below accurately. Print or type all information. *Submit this application with a cover letter, resume, and the contact information for three professional references to:*

Ti Gauger, Alice in Dairyland Program Director PO Box 8911 Madison, WI 53708-8911 ti.gauger@wisconsin.gov (Email submissions are preferred)

All application materials must be received at WDATCP by 4:30 PM Monday, February 4, 2019

1. Contact Information:

Last Name:	First Name:	Middle Name	Date of Birth:	
Preferred Mailing Address:				
City:	State:		Zip:	
Home Address if different:				
Home Phone:	E-Mail Address:			
Cell Phone:	Preferred method for calling	g (circle one): Home Ph	one Cell Phone	
2. I am currently legally authorized to work in the United States. Yes No				
3. I am a Wisconsin resident.	Yes No			

4. I have a valid Wisconsin Driver's License. Yes	No
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If Yes, please provide your Wisconsin Driver's License number:

5. Certification Statement: I certify that the information I have provided in this application, cover letter, resume, three professional references, and summary of qualifications is true to the best of my knowledge. I understand that I may be required to verify information. I understand that any false, misleading, or missing information may disqualify me from employment consideration.

Signature:

Date: