

JOB SEARCH REPORT

NAME: _____ PIN #: _____ DOB: _____ Month of: _____

Fill in the requested information and return to: **PRICE CO CHILD SUPPORT AGENCY**
126 CHERRY STREET
PHILLIPS, WI 54555

If you are employed: Starting date: _____ Employer's Name: _____ City: _____ State: _____ Zip: _____

Employer's address: _____ Employer's phone number: _____ Rate of pay: \$ _____ per _____ (hour/week/month)

If you are unemployed: Date that you registered for work at Wisconsin Job Center _____
 Use the spaces below to fill in information about the places you have applied for work.
 If you have more contacts to report, attach additional sheets.

Date	Name and Address of Employer	Method of Contact	Results	Signature of Person Contacted
	Employer Name: _____ Street Address: _____ City, State, Zip: _____ Phone: () - _____	<input type="checkbox"/> Employer Visit <input type="checkbox"/> Application <input type="checkbox"/> Interview	<input type="checkbox"/> Hired <input type="checkbox"/> Not Hired	
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