## Washburn County Health and Human Services Department

Jim LeDuc, Director

## JOB SEARCH REPORTING FORM

- ✓ Per court order, you need to actively and diligently seek work, by applying to FIVE places of employment per week.
- ✓ If you have additional contacts to report, please write them on the back of this report.
- If you submit applications online, you must provide a screen print of "application submitted" or confirmation number.

You can obtain additional copies of this form by making your own, contacting child support agency 715-468-4747, or by emailing: <a href="mailto:childsup@co.washburn.wi.us/news/child-support">childsup@co.washburn.wi.us/news/child-support</a> (Court Ordered Work Search page) and print your own.

First N	name:	Last	Name:	*Please print clearly		
	Date	Employer Name/Address Phone #/Email address	How Contacted	Name Person Contacte Phone # or email	d Work Sought	Results
example	3/7/17	ABC Industries 123 ABC Drive Spooner, Wi 715-123-4567 abc@email.job	☐ In Person ☐ Telephone ☐ Online ☐ Application ☐ Interview ☐ Mail	John Doe, HR 715-123-7654 abcJOHN@email.job	Clerk	☐ Not Hiring ☐ Pending ☐ Hired ☐ App on File
1.			☐ In Person ☐ Telephone ☐ Online ☐ Application ☐ Interview ☐ Mail			☐ Not Hiring ☐ Pending ☐ Hired ☐ App on File
2.			☐ In Person ☐ Telephone ☐ Online ☐ Application ☐ Interview ☐ Mail			☐ Not Hiring ☐ Pending ☐ Hired ☐ App on File
3			☐ In Person ☐ Telephone ☐ Online ☐ Application ☐ Interview ☐ Mail			□ Not Hiring □ Pending □ Hired □ App on File
4			☐ In Person ☐ Telephone ☐ Online ☐ Application ☐ Interview ☐ Mail			☐ Not Hiring ☐ Pending ☐ Hired ☐ App on File
5			☐ In Person ☐ Telephone ☐ Online ☐ Application ☐ Interview ☐ Mail			☐ Not Hiring ☐ Pending ☐ Hired ☐ App on File
Work	Search Ad	ction: If your work search actions	were not business/employer cont	acts, record those actions yo	ou did to find a job below	
Date of Action			•	·	Location	
Example 3/7/17 Attend		Attended a resume p	reparation workshop at the Career	Center	Job Center in Spooner	
ı£	FMP:	OVED an abtelle For 1			<u> </u>	
		OYED or obtain Employment: loyer's Name	Employer's Address	Payroll Phone	# Rate of Pay	Per (hr/week/month)
I decla	are, under p	penalty of perjury, that the forego	ing, including any attachments, is	complete, true and correct.		
Signat	ture and Da	ate				
•						