

# JOB SEARCH MONTHLY REPORT FORM

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ Case No. \_\_\_\_\_

During the month of \_\_\_\_\_, 20\_\_, I made application for employment with the following employers:

EMPLOYER'S NAME & ADDRESS	EMPLOYER TELEPHONE/EMAIL	DATE OF APPLICATION
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____
11. _____	_____	_____
12. _____	_____	_____
13. _____	_____	_____
14. _____	_____	_____
15. _____	_____	_____

I was hired at \_\_\_\_\_ on \_\_\_\_\_  
(Name & Address)(Date)

***I understand that child support services may verify the information provided in this report by contacting the employers I have listed.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Return this completed form to: **Portage County Child Support Services**, 817 Whiting Avenue, Stevens Point, WI 54481. Fax: 715-343-6263. Telephone: 715-346-1588 if questions.