

**WISCONSIN DEPARTMENT OF REVENUE  
LIMITED-TERM EMPLOYMENT APPLICATION**

*Applicants must be 18 years or older to apply.  
A criminal background check and tax non-filer check will be conducted prior to offer of employment.*

**COMPLETE ALL SECTIONS OF THIS APPLICATION** (type or print clearly)

Name (Last)		First		M.I.
Home Address		City	State	Zip Code
Home Phone Number (     )     -		Secondary Phone Number (     )     -		Email Address

**Best method to contact you by:**     Phone     Email

**SHIFT PREFERENCE** (check shifts you are willing to accept)

Full-time (40 hours per week)     Part-time (less than 40 hours per week)

**JOB INTEREST** (check area you are applying for)

- Customer Service Rep       Data Entry       Homestead Credit Tax Rep       Laborer  
 Mail Opener / Mail Reviewer       Scanning       Tax Representative       Unclaimed Property Tax Rep  
 Other (please list) \_\_\_\_\_

**SKILLS & EXPERIENCE**

Typing / Keyboarding: Words per minute \_\_\_\_\_      Customer Service:  Telephone     Person-to-Person  
 Personal Computer Skills:  Access     Excel     SAS     Word     Other \_\_\_\_\_

Accounting / Math (describe any training, education or experience):

Other equipment you can skillfully operate:

Other languages in which you are fluent:

**WORK EXPERIENCE** (begin with most recent employer)

Employer	Employment Dates	Supervisor Name & Phone Number
Your duties:		
Employer	Employment Dates	Supervisor Name & Phone Number
Your duties:		

**GENERAL INFORMATION**

- 1. Have you worked at the Department of Revenue previously? .....  Yes  No  
 If Yes, what area? \_\_\_\_\_  
 Dates worked: \_\_\_\_\_
- 2. Are you currently a State of Wisconsin employee? .....  Yes  No  
 If Yes, where are you currently employed? \_\_\_\_\_
- 3. Are you a legal resident of Wisconsin? .....  Yes  No  
 If you are in this country temporarily, indicate visa status \_\_\_\_\_
- 4. Do you have any relatives currently employed by the Wisconsin Department of Revenue? . . . . .  Yes  No  
 If Yes, please list:  
 Name \_\_\_\_\_  
 Division \_\_\_\_\_
- 5. How did you learn of this job opportunity? \_\_\_\_\_

**For research and Affirmative Action / Equal Employment Opportunity reporting only, please check the appropriate categories:**

Gender:  Female  Male

Birthdate: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
(must be 18 years or older to apply)

Racial / Ethnicity:

- American Indian / Alaska Native
- Asian
- Black / African American
- Hispanic / Latino
- Native Hawaiian / Other Pacific Islander
- White
- Other

Disability Status:

Wisconsin defines a person with a disability as someone who:

- 1) has a physical or mental impairment which makes achievement unusually difficult or limits the capacity to work;
- 2) has a record of such impairment; or
- 3) is perceived as having such impairment.

Check here if you wish to identify yourself as disabled for affirmative action purposes.

*I certify that the information I provided on this application is true and complete to the best of my knowledge, and that any false, misleading, or missing job-related information may disqualify me from employment.*

Signature	Date (mm/dd/yyyy)
-----------	-------------------

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

Return completed application to:  
**Wisconsin Department of Revenue**  
**Human Resource Office**  
**2135 Rimrock Rd 6-261**  
**PO Box 8931**  
**Madison WI 53708-8931**

or Email: [DORHumanResources@wisconsin.gov](mailto:DORHumanResources@wisconsin.gov)