



NOTICE: to Applicants or Nominees for Employment

Under the **Wisconsin Open Records Law** the **identity of applicants/nominees** is considered public information unless they request confidentiality in writing. Confidentiality of this information will be maintained except that the identity of all applicants/nominees recommended for final consideration must be revealed upon request.

If you want your name and other identifying information related to this application to be confidential, please sign and date this form below and return by the closing date to the address indicated in the position announcement.

I do not want the University of Wisconsin-Extension to reveal my identity nor to provide public access to any record or other information that may reveal my identity. I understand that if I am included among the finalists for the position of _____ my identity shall be revealed if the University of Wisconsin-Extension is asked to provide a list of finalists.

Name of Applicant/Nominee (please print)

Signature of Applicant/Nominee

Date