

Search & Screen Committee
for:

Position Title: _____ **Position #:** _____.

Applicant/Nominee Identity Preference Form

Wisconsin Stat. 19.36(7)

(We are required to provide the public, upon request, a list of all nominees and applicants who have **not** requested, in writing, that their identity not be revealed. Persons agreeing to be final candidates **will** have their identity revealed as a final candidate. If this form is not received within one (1) week after the deadline for applications, we will assume you agree to have your name revealed.)

_____ I do not want my identity revealed.

_____ You may reveal my identity.

(Printed Name)

(Signature)

(Date)

Please return to the Chair of the Search & Screen Committee.