



WATEA WHEELS TO WORK

INITIAL SCREENING APPLICATION



APPLICANT INFORMATION

Full legal name as listed on driver's license: _____

Phone: _____ Able to receive text messages: ☐ Yes ☐ No

Email: _____

Home address (street, city, ZIP): _____

Wisconsin driver's license number: _____

Date of Birth: _____ Social Security Number: _____

INITIAL ELIGIBILITY — ALL ITEMS MUST BE MET

1. **Vehicle need** (check one): ☐ Keep a job ☐ Attend school/job training to gain employment

2. **Marathon County connection** (check one): ☐ I live in Marathon County ☐ I work in Marathon County

3. **Driver's license**: ☐ I have a valid, active Wisconsin driver's license (number listed above).

**Any outstanding court cases that could affect your ability to maintain a valid driver's license and current employment must be resolved before applying.*

4. **Prior 12 weeks**: ☐ I have been employed or actively attending school/job training during the 12 weeks before applying.

If checked, describe employer or school/training program and dates:

ACKNOWLEDGMENT

I certify that the information provided is true and complete. I understand that all initial requirements must be met to continue. If I do not meet the initial requirements, my application will be denied, and I may reapply when I meet them. Meeting these requirements does not guarantee a loan; further documentation, budgeting, education, and program approval are required.

Applicant signature: _____

Date: _____

WATEA STAFF USE ONLY

☐ Meets initial requirements / proceed ☐ Does not meet requirements / deny

Staff name / date / notes:
