

# EMPLOYMENT

## VERIFICATION

EAP Form 2.05 (Rev. 01/18)



STATE OF WISCONSIN  
EDUCATIONAL APPROVAL PROGRAM  
P.O. Box 8366  
MADISON, WI 53708-8366  
(608) 266-1996

School Name:

Ultimate Medical Academy (Online)

Reporting Period<sup>2</sup>:

(Select One)

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July 1, 2017 thru June 30, 2018 (standard reporting year)

thru

Student Name (Completer)	Program Student Completed	Employer Name <sup>3</sup> (use "na" if the student did not find employment)	Position or Job Title	Employer Contact (include name and phone number)	Date Student Began Employment	Date Employer was Contacted
Billups, Darlene N	HCM	Traditions Of Owatonna	Certified Nursing Assistant	Jeannie Rogers (507) 455-0700	09/20/2017	12/20/2017
Fuentes, Samantha	HS-MAA	Community Health Systems/Beloit Area	Receptionist	Daniel Marks (608) 361-0311	01/03/2018	03/13/2018
Hightower, Gabrielle	HCM	CE	N/A	N/A	N/A	N/A
Hurt, Dominique	MAA	CE	N/A	N/A	N/A	N/A
Jackson, Taniesha	HS-MOBS	Wisconsin Department of Military Affairs	Medical Records Technician	Sgt. Wilson (608) 242-3000	12/26/2017	01/24/2018
Lesinki, Karin E	HS-MAA	Walgreens Pharmacy/#10758	Pharmacy Technician	Toby C. (715) 685-0202	04/27/2018	06/05/2018
McAfee, Jordyn H	HS-MAA	Oak Creek Assisted Living/Algoma, WI	Personal Care Worker	Marie Pinchart (920) 487-8152	12/16/2017	03/30/2018
Additional records may be provided by inserting new rows.						

**NOTE:** To insert new rows in the table, place the cell reference pointer in the last row (prior to entering data) and CLICK INSERT on the MENU BAR and then SELECT ROWS.

<sup>1</sup> The following definitions apply to the terms as used in the column headings (and on the renewal application): Completers – Students who completed their program and received their degree, diploma or certificate during the reporting year. Employed – Completers who found new employment in a training-related field, students who advanced with their current employer as a direct result of training provided by the school or students whose employer required completion of the program. **Only report data for individuals who are considered Wisconsin students [see Wis. Admin. Code s. SPS 401.01 (35)].**

<sup>2</sup> Enter the end date of the twelve month reporting period you will use when you submit your next renewal application. The reporting period as defined on the renewal application is the "most recently completed" (at the time you complete the renewal forms) twelve-month fiscal period on which the school operated, ending on a date no earlier than fifteen months [prior to the date of completing the renewal application].

<sup>3</sup> If a completer is self-employed or is continuing their educational studies (at your school or another school), please use SE or CE, respectively.