



2008 WINPAC Candidate Interview Volunteer Form

I am interested in participating in the WINPAC Candidate Interview Process.

Name _____

Address _____

City _____ ZipCode _____

Email _____

Phone (H) _____

Phone (Other) _____

Fax _____

The WINPAC Board of Trustees thanks for your involvement in this very important process.

Please return to WINPAC, 6117 Monona Drive, Suite 1, Madison WI 53716
FAX 608-221-2788 or Email: mary@wisconsinnurses.org