

**BROWN COUNTY HEALTH & HUMAN SERVICES**

111 N. Jefferson Street  
P.O. Box 22188  
Green Bay, WI 54305-2188



Dear Applicant:

Thank you for your interest in the Pals Program. As you complete the application, please note that we ask for three references. These individuals should not be related to you. We prefer you choose someone who knows you well enough to answer questions about your reliability, tolerance level, and ability to communicate with children. Please notify the individuals you give as references that they will be receiving a questionnaire from us.

**For your application to be considered complete please return the following items:**

- Application
- Background Information Disclosure Form
- Copy of your driver's license
- Verification of your auto and homeowner's/renter's insurance.

**Applications can be returned to:**

Brown County Health & Human Services Department  
Pals Program  
111 N Jefferson St  
PO Box 22188  
Green Bay, WI 54305-2188

A coordinator will contact you for an in-home interview after we've received the completed reference questionnaires and background check information.

If you have any questions, please feel free to contact:

- Jamie Chaudoir, 920-448-6271 or [Chaudoir\\_JL@co.brown.wi.us](mailto:Chaudoir_JL@co.brown.wi.us)
- Jenna Durkee, 920-448-6028 or [Durkee\\_JM@co.brown.wi.us](mailto:Durkee_JM@co.brown.wi.us)

Sincerely,

Pals Program Coordinators

