



# Wisconsin Well Woman Program

Eau Claire City-County Health Department  
720 Second Avenue  
Eau Claire, WI 54703-5497  
715-839-4718  
FAX: 839-1674

**Enrollment  
lasts for  
12 months**

### PLEASE FOLLOW THESE STEPS TO ENROLL INTO THE WISCONSIN WELL WOMAN PROGRAM:

1. Complete the Wisconsin Well Woman Enrollment Form, leaving nothing blank
2. SIGN THE FORM
3. Answer the following eligibility questions and sign this form.
4. **Return both forms with proof of age and income in envelope provided**

Age: \_\_\_\_\_ (Please provide copy of ID card, Driver's License, Birth Certificate, or Passport)

Household Size (Include Self, Spouse, and Children under 18): \_\_\_\_\_

Monthly Household Gross Income (Before Taxes): \_\_\_\_\_

(Please provide proof of income: 30 days of most recent paycheck stubs or most recent tax return)

Do You Have Health Insurance?  No  Yes, Deductible: \_\_\_\_\_

Do you currently smoke or use tobacco products?(Y/N) (this is not an eligibility question)

Cigs?\_\_\_\_ Smokeless Tobacco?\_\_\_\_ Cigars?\_\_\_\_ Hookahs?\_\_\_\_ E Cigarettes?\_\_\_\_

Do you need an interpreter? If yes, language: \_\_\_\_\_

**Your Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

By signing this form you are assuring the accuracy of the information provided. Please notify your coordinator with any changes to household income or insurance status as soon as possible.

**\*If you have BadgerCare Plus or Medicare Part B, you do NOT meet eligibility criteria**

*Once received, eligibility will be reviewed. If you qualify for WWWP, you will be sent a welcome packet with specific information about how to use the program.*

*A pink card will come to you in the mail 7-10 business days after your enrollment start date.  
If you have questions, call your well woman coordinator-Jackie Krumenauer @ 715-839-4718*