



**DETACH FROM APPLICATION
AND SUBMIT SEPARATELY**

PRE-EMPLOYMENT Applicant Data Form

Notice to Applicants - Completion of this form is voluntary.

We are an Affirmative Action, Equal Opportunity Employer. Our employment decisions are made without regard to race, color, religion, gender, national origin, age, disability, marital status, veteran or military status, or any other legally protected status. The purpose of this *Applicant Data Form* is to comply with government record-keeping and reporting requirements. Periodic reports are made to the government on the following information. The data you provide on this form will be kept confidential and used solely for statistical purposes. This form is processed and maintained separately from your employment application and is not used in the interview or selection process. Completion of this form is optional and voluntary.

Application Date: _____ **Position Applied For:** _____

Applicant Name: _____ **Social Security Number:** _____

Race/Ethnic Code: (Please Select One)

Ethnicity:

Hispanic or Latino—A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race;

Race:

White (not Hispanic or Latino)—A person having origins in any of the original peoples of Europe, North Africa, or the Middle East;

Black or African American (Not Hispanic or Latino)—A person having origins in any of the Black racial groups of Africa;

Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)—A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands;

Asian (Not Hispanic or Latino)—A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam;

American Indian or Alaskan Native (Not Hispanic or Latino)—A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community recognition; and

Two or More Races (Not Hispanic or Latino)—All persons who identify with more than one of the above five races.

Sex/Gender Code: (Please Select One)

Male

Female

Signature: _____ **Date:** _____