

Equal Employment Opportunity Self-Identification Form

Why are you being asked to complete this form?

We are an Equal Opportunity Employer and are subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. To comply with these laws, we invite you to voluntarily self-identify your gender, race/ethnicity, veteran status, and disability status. Submission of this information is voluntary, and refusal to provide it will not subject you to any adverse treatment. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws and regulations.

Please print this form, complete the fields below by typing or writing in your responses, and return it to the Human Resources department.

Personal Information

Full Name:

Date:

Position Applied For / Job Title:

1. Gender Identification

Please specify your gender (e.g., Male, Female, Non-binary, or Choose not to disclose):

Gender:

2. Race or Ethnic Identity

Please review the descriptions below and specify your race/ethnicity in the text field:

- **Hispanic or Latino:** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- **White (Not Hispanic or Latino):** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- **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 original 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.
- **American Indian or Alaska 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 attachment.
- **Two or More Races (Not Hispanic or Latino):** All persons who identify with more than one of the above five races.
- **Decline to Disclose:** If you choose not to identify your race/ethnicity.

Race/Ethnicity Choice:

3. Veteran Status

Please review the categories below and specify your status (e.g., Veteran, Active Duty, Not a Veteran, or Choose not to disclose):

- **Disabled Veteran:** A veteran of the U.S. military, ground, naval or air service who is entitled to compensation under laws administered by the Secretary of Veterans Affairs.
- **Recently Separated Veteran:** Any veteran during the three-year period beginning on the date of such veteran's discharge or release from active duty.
- **Active Duty Wartime or Campaign Badge Veteran:** A veteran who served on active duty in the U.S. military during a war, or in a campaign or expedition for which a campaign badge has been authorized.

- **Armed Forces Service Medal Veteran:** A veteran who, while serving on active duty in the U.S. military, participated in a United States military operation for which an Armed Forces service medal was awarded.

Veteran Status Choice:

4. Disability Status

You are considered to have a disability if you have a physical or mental impairment or medical condition that substantially limits a major life activity, or if you have a history or record of such an impairment or medical condition.

Please specify your status (e.g., Yes, I have a disability; No, I do not have a disability; or Choose not to disclose):

Disability Status Choice: