Voluntary Applicant Survey Form

An Equal Opportunity, Affirmative Action Employer

Last n	ame First name	Middle initial(s)
\sum		
Date	Position(s) for whic	h you are applying
equal e agencie negativ used to form, w	read carefully (voluntary disclosure): As an affirm employment opportunity and affirmative action process. If you choose not to provide some or all of this re or adverse treatment. The information you prove monitor our compliance with equal opportunity we will immediately place it in a confidential file seend this form separately via mail or email to dray@	rogram, and report these results to government is information, you will not be subject to any wide is completely voluntary and will only be laws and regulations.* When we receive this eparate from your application. If you wish, you
Race/E	thnicity – Select one or more	
	American Indian or Alaskan Native: A person hav North, South or Central Americas, and who main attachment.	tains tribal affiliation or community
	Asian: A person having origins in any of the origin Indian subcontinent including, for example, Cam Pakistan, the Philippine Islands, Thailand and Vie	bodia, China, India, Japan, Korea, Malaysia,
	Black or African American: A person having origin Hispanic or Latino: A person of Cuban, Mexican, Spanish culture or origin, regardless of race.	
	Native Hawaiian or Other Pacific Islander: A pers of Hawaii, Guam, Samoa, or other Pacific Islands	
	White: A person having origins in any of the origin North Africa. Do not wish to answer	nal peoples of Europe, the Middle East, or
Disability – Are you a person with a disability?		
	Yes	
	No	
	Do not wish to answer	
Sex/Ge	nder – Select one	
	Female	
	Male Non-Binary/Transgender/Gender Non-Conformii	ng

☐ Do not wish to answer