

AFFIRMATIVE ACTION DATA RECORD

Employees are treated during the hiring process and employment without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

As an employer with an Affirmative Action Program, we comply with government regulations, including Affirmative Action responsibilities where they apply.

The purpose for this Data Record is to comply with government record keeping, reporting, and other legal requirements. Periodic reports are made to the government on the following information. The completion of this Data Record is optional. If you choose to volunteer the requested information, please note that all Data Records are kept in a Confidential File and are not a part of your Application for Employment or personnel file. **Please note: YOUR COOPERATION IS VOLUNTARY. INCLUSION OR EXCLUSION OF ANY DATA WILL NOT AFFECT ANY EMPLOYMENT DECISION.**

PLEASE PRINT

Last Name	First Name	Middle Name		

Address: Number	Street	City	State	Zip

Telephone Number(s) Home	Office	Cell		

REFERRAL SOURCE

<input type="checkbox"/> Advertisement	<input type="checkbox"/> Employee	<input type="checkbox"/> Relative	<input type="checkbox"/> Private Employment Agency
<input type="checkbox"/> Friend	<input type="checkbox"/> Inquiry	<input type="checkbox"/> Government Employment Agency	<input type="checkbox"/> Other _____

COMPLETE ONLY THE SECTIONS BELOW THAT BEEN CHECKED:

	Current Job
	Birthdate (month/day/year)
	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
	Ethnic Origin: <input type="checkbox"/> White <input type="checkbox"/> Black or African American <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Two or More Races
	Check if any of the following are applicable: <input type="checkbox"/> Vietnam Era Veteran; <input type="checkbox"/> Disabled Veteran; <input type="checkbox"/> Disabled Individual

Signature of Applicant

Date

Printed Name of Applicant

Office Use Only:

Position applied for is open Yes No

Position(s) considered for: _____

Hired for the following position: _____ Start Date: _____