



Voluntary Pre-Employment Information Form

Date: _____

Name: _____

Position Applied For: _____

Race / Ethnic Group:

White _____
Black/African American _____
Hispanic or Latino _____
Asian _____
American Indian or Alaska Native _____
Native Hawaiian or Other Pacific Islander _____

Sex: Male _____ Female _____

Are you a disabled Veteran? Yes _____ No _____

Are you a Vietnam-era Veteran? Yes _____ No _____

Are you an Other Veteran? Yes _____ No _____

Other Veteran means veterans who served on active duty during a war or in a campaign or expedition for which a campaign badge has been authorized.

Signature: _____

Qualified applicants are considered for employment, and employees are treated during employment, without regard to race, color, religion, sex, national origin, age, marital status, medical condition or disability.

Please complete this information to assist us in complying with equal employment opportunity record keeping and reporting requirements. Providing this information is voluntary, refusal to provide the information will not result in any adverse treatment. This information form will be kept in a separate file and will be used only for government purposes.