

Blaine School District No. 503
Request for Affirmative Action Program Data

THE INFORMATION REQUESTED IS VOLUNTARY. Your responses will be kept separate from other documents relating to your application. This document will not be used by the individuals who process your application.

The information given below is confidential and will be used for statistical reporting as part of our Affirmative Action Program.

If you do not wish to provide the following information, please check here: and print your name below.

Name: _____

Position Applied For: _____

Date: _____

Sex: Female Male

Are you in a protected group (40 years of age or older)? Yes No

Are you a person with a disability? Yes No

Definition: *A person with a physical or mental impairment which substantially limits one or more of the life activities of such individual; or one who has a record of such impairment; or is regarded as having such an impairment. (This definition is from federal law in the Americans with Disabilities Act.)*

Are you a veteran of the Armed Forces? Yes No

Are you a Vietnam Era veteran? Yes No

Any person who served on active duty for a period of more than 180 days, any part of which occurred between August 5, 1964 and May 7, 1975.

Ethnicity/Race: This is a two-part question.

Ethnicity

1. (Y) Hispanic/Latino *or* (N) Not Hispanic/Latino

Race: Check *all* that apply.

2. (I) American Indian or Alaska Native

(A) Asian

(B) Black

(P) Native Hawaiian or Other Pacific Islander

(W) White