



IPEDS / AFFIRMATIVE ACTION FORM

We request the following information from employees so that we can accurately identify the gender, racial, and ethnic composition of our workforce. We will use this data solely for the purposes of generating statistics for the federally required IPEDS (Integrated Post Secondary Education Data System) report and for our affirmative action reports.

Completion of this form is strictly voluntary. We encourage you to assist us, however, by completing and returning it to us so that our statistics are as accurate as possible.

Please Print

Full Name _____

_____ Male _____ Female

Race/Ethnic Identification (as defined by the Equal Opportunity Employment Commission), please answer both questions (1 & 2) below.

1. Do you consider yourself:

_____ Hispanic/Latino (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)

_____ Not Hispanic or Latino

2. In addition, select one or more of the following racial categories to describe yourself:

_____ **American Indian or Alaska Native** (A person having origins in any of the original peoples of North and South America (including Central America) who maintains cultural identification through tribal affiliation or community attachment.)

_____ **Asian** (A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.)

_____ **Black or African American** (A person having origins in any of the black racial groups of Africa).

_____ **Native Hawaiian or Other Pacific Islander** (A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.)

_____ **White** (A person having origins in any of the original peoples of Europe, the Middle East, or North Africa)

Please feel free to clarify your responses above: _____