

Affirmative Action Information

We would like to maintain the following statistical information to assure compliance with state and federal Equal Employment Opportunity laws. The information requested is strictly voluntary and will remain separate from your application for employment, the application process and your personnel file. Personnel who process your application will not have access to this information. This information will be locked in a file cabinet, and only the Administrative Services Manager will have access to it. This information may be released to certain designated persons in the event that you request a reasonable accommodation for a disability.

Title of Position: _____

Application Date: _____

Applicant Name: _____
 First Middle Initial Last

Address: _____

Social Security No: _____ Birth Date _____

Please check all of the following items that apply to you:

| | | | |
|-------|-----------------|-------|--------------------------------|
| _____ | Female | _____ | Over 40 years old |
| _____ | Male | _____ | Under 40 years old |
| _____ | Hispanic | _____ | American Indian/Alaskan Native |
| _____ | African Descent | _____ | Asian or Pacific Islander |

_____ Disabled (impairment which substantially limits one or more of a person's life activities) If so, please explain: _____

_____ Resident of housing provided by Bellingham Whatcom County Housing Authorities
_____ Current _____ Former

_____ Disabled Veteran (30% VA compensation, or discharged due to disability incurred in the line of duty)

_____ Vietnam Era Veteran (180 days active duty between 8/5/64 and 5/7/75)

All answers are true and complete to the best of my knowledge. I understand that untruthful or misleading answers are cause for rejection of my application, removal of my name from the register, or dismissal, if employed.

Signature

Date