

REQUEST FOR SUPPLEMENTAL INFORMATION

Note: Completion of this form is totally voluntary on your part. Return this form directly to: NWOSU Human Resources, 709 Okla. Blvd., Alva, OK 73717. This form should never be sent to hiring supervisor.

To assist us with the preparation of various governmental reports and statistical information for the Office of civil Rights, U.S. Department of Health, Education, and Welfare, the Equal Employment Opportunity Commission, and our own Affirmative Action Plan, the following information is requested. This information will not be used to discriminate against or to show preference for any application in the hiring decision. (Double click each line before typing in word processing program.)

NAME: _____ **SEX:** ___ Male ___ Female

POSITION APPLIED FOR: _____

ETHNIC INFORMATION (Check only one):

___ **White** (not of Hispanic origin. A person having origins in any of the original peoples of Europe, North Africa, or the Middle East).

___ **Black, non-Hispanic** (A person having origins in any of the black racial groups of Africa).

___ **Asian or Pacific Islander** (A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This includes people from China, Japan, Korea, the Philippine Islands, American Samoa, India, and Vietnam).

___ **American Indian or Alaskan Native** (A person having origins in any of the original peoples of North America or who maintains cultural identification through tribal affiliation or community recognition).

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

VETERAN INFORMATION:

Do you qualify as a Vietnam Era Veteran? ___ Yes ___ No

(Any veteran of the armed services who served on active duty for at least 181 days, any part of which occurred between August 5, 1964, and May 7, 1975, and was discharged honorably or released sooner because of a service-related disability).

Are you considered a disabled veteran by the U.S. Veterans Administration? ___ Yes ___ No

DISABILITY INFORMATION:

Do you wish to declare yourself as qualifying for reasonable accommodations as provided for by the Americans with Disabilities Act? ___ Yes ___ No

How did you learn of this position opening? _____