## MOUNTHOLYOKE.

## EQUAL EMPLOYMENT OPPORTUNITY INFORMATION REQUEST

We would appreciate your cooperation in completing the information requested on this form. Although doing so is voluntary on your part, the information you provide is vital to the College's compliance with the Civil Rights Act of 1991, Title IX of the Education Amendment Act of 1972, Executive Order 11246, the Rehabilitation Act of 1973 as amended, the Americans with Disabilities Act of 1990, and the Vietnam-era Veteran's Act of 1974.

NAME:
CITIZENSHIP: U.S. YES $\square$ NO $\square$

## SEX:

$\qquad$
OTHER: $\qquad$

## ETHNIC AND RACE DATA:

The questions below should not be interpreted as scientific or anthropological in nature. Developed by the Federal government, it allows for the collection and use of consistent and compatible ethnic and race data by the Federal agencies.

1. Do you consider yourself to be of Hispanic/Latino origin: a person of Spain, Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race?

2. In addition, please 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), and who maintains 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.
$\square$ Black or African American: a person having origins in any of the black racial groups of Africa or the Caribbean.
$\square$ 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 or the Middle East or North Africa.

## VETERANS DATA:

Do you qualify as a Vietnam Era Veteran?

$\mathrm{NO}: \square$
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. Veteran's Administration?

$\mathrm{NO}: \square$
Any person entitled to compensation by the Veteran's Administration for a disability rated at 30 percent or more, or who was discharged or released from active duty by reason of service-connected disability.

## DISABILITY DATA:

Do you wish to declare yourself as mentally or physically disabled?


Any person who has a physical or mental impairment which substantially limits one or more major life activities:

| Speech impairment Multiple disabilities | Hearing impairment <br> Motor impairment | Visual impairment |
| :---: | :---: | :---: |
|  |  | Mental disability |

Other $\qquad$

Signature of Applicant

