

Affirmative Action voluntary Information
COMPLETION OF INFORMATION BELOW IS VOLUNTARY

We consider all applicants for positions without regard to race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve/national guard or any similarly protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria.

To be completed by applicant on a **voluntary** basis. Not for interview purposes. To be filed separately from application. In an effort to comply with requirements regarding government record keeping, reporting and other legal obligations, which may apply, we invite you to complete this applicant data survey. Providing this information is **STRICTLY VOLUNTARY**. Failure to provide it will not subject you to any adverse personnel decision or action. Your cooperation is appreciated. Please be advised this survey is not a part of your official application for employment. It will not be used in any hiring decision. The information will be used and kept confidential in accordance with applicable laws and regulations

PLEASE PRINT

Position(s) applied for _____ Date ____ / ____ / ____

Referral Source

- | | | |
|---|---|--|
| <input type="checkbox"/> Walk-in | <input type="checkbox"/> Government Employment Agency | <input type="checkbox"/> Private Employment Agency |
| <input type="checkbox"/> Employee | <input type="checkbox"/> Relative | <input type="checkbox"/> School |
| <input type="checkbox"/> Advertisement – Source _____ | | <input type="checkbox"/> Other _____ |

Name of person who referred you (if applicable) _____

Applicant Information

Name _____
Last First Middle

Address _____ Telephone () _____
Street City State Zip Code

- Male Female

Please check one of the following Equal Employment Opportunity Identification Groups:

- | | | |
|---|---|--|
| <input type="checkbox"/> White (not of Hispanic origin) | <input type="checkbox"/> Black (not of Hispanic origin) | <input type="checkbox"/> Hispanic |
| <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> Asian/Pacific Islander | <input type="checkbox"/> <u>Multiracial (having parents of Different races)</u>
THIS IDENTIFICATION IS RECOGNIZED ONLY IN THE STATE OF MICHIGAN |

For Administrative Use Only

Position(s) applied for Available Not Available

Other positions considered for _____

Hired Yes No

Position hired for _____

From the EEO job classifications listed below, which one best describes the position filled?

- | | | | | |
|---|--|--|--|--|
| <input type="checkbox"/> Officials/managers | <input type="checkbox"/> Sales Workers | <input type="checkbox"/> Operatives (semi-skilled) | <input type="checkbox"/> Professionals | <input type="checkbox"/> Office and Clerical Workers |
| <input type="checkbox"/> Laborers (unskilled) | <input type="checkbox"/> Technicians | <input type="checkbox"/> Craft Workers (skilled) | <input type="checkbox"/> Service Workers | |

Notes _____

Position(s) applied for _____ Date ____ / ____ / ____