Mount Aloysius College is periodically required to report race and ethnic data to the federal government about our workforce. We are also required to submit reports with regard to the number of veterans employed by the College. In order to comply with government reporting requirements, Mount Aloysius College invites employees to voluntarily and confidentially self-identify their race, ethnicity and veteran status.

Submission of this information is voluntary and the refusal to provide it will not subject you to any adverse treatment. The information will be kept confidential and will only be used in accordance with the provisions of applicable laws. When reported, data will not identify any specific individual.

Employee Name ___________________________________

First, Middle, Last

RACE & ETHNICITY

1. Are you Hispanic or Latino? (“Hispanic or Latino,” is defined to mean a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.)
   □ Yes □ No

2. Please report your race or races from the following list:

   □ White – a person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
   □ 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.
   □ 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.
   □ 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.
   □ Two or More Races – All persons who identify with more than one of the above five (5) races.

VETERAN STATUS

□ Disabled veteran □ Vietnam Era Veteran
□ Veteran other than Vietnam Era □ Non Veteran

□ I prefer not to provide the information requested.

Please sign and date below.

Employee Signature ______________________________ Date ____________________