The employer is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, the employer invites employees to voluntarily self-identify their race or ethnicity. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcement. When reported, data will not identify any specific individual.

**Are you Hispanic or Latino?**
- Yes
- No

**What is your race? Select one or more.**
- American Indian* or Alaska Native
  - Requires supporting documentation of Tribal affiliation or heritage
- Asian
- Black or African American
- Native Hawaiian or Pacific Islander
- White

**Do you have a primary Ethnic Group (Optional)?**
- Hispanic or Latino
- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Pacific Islander
- White
- No Primary

**AUTHORIZATION**
I authorize my employer to make the appropriate changes to my employee data as noted on this form.

Employee Signature: __________________________ Date: __________________________