

## Affirmative Action Information

Completing this form will enable Washington State to assess the many talents and skills that are available throughout the workforce. To ensure equal employment opportunity, we ask your voluntary cooperation in responding to the questions below. This information will be treated as confidential, and will be available *only* to authorized personnel. Please review the Affirmative Action Definitions at the bottom of this page.

Name (Last, First, Middle Initial)	Position Applied For	Date of Birth	Social Security Number
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**1. What race(s) or culture(s) do you consider yourself?**

- Black / African-American (870)
- Caucasian / White (800)
- Asian or Pacific Islander (API):
  - Chinese (605)                       Vietnamese (619)
  - Filipino (608)                       Asian Indian (600)
  - Hawaiian (653)                     Japanese (611)
  - Korean (612)                         Cambodian (604)
  - Samoan (655)                         Laotian (613)
  - Guamanian (660)
  - Other API [Please identify below]

American Indian (597) [Please identify the name of the enrolled or principal tribe below]:

- Eskimo (935)
- Aleut (941)
- Mexican, Mexican-American (722)
- Puerto Rican (727)
- Chicano (705)
- Cuban (709)
- Other Spanish [Print one group below such as Colombian, Dominican, Nicaraguan, Spaniard, etc.]

Other Race [Please indicate race or culture below]

**If you are more than one race, please also check "Multi-Racial" below and indicate your preference for Affirmative Action purposes.**

Multi-Racial \_\_\_\_\_  
(Affirmative Action Preference)

2. Are you  Male  Female

**3. Have you ever been on active duty in the U.S. Armed Forces?**

- Yes                       No    Dates: \_\_\_\_\_
- Vietnam-era Veteran
- Disabled Veteran [Percent of disability: \_\_\_\_\_ % ]

4. **Do you have a physical, sensory, or mental condition that substantially limits any of your major life functions**, such as working, caring for yourself, walking, doing things with your hands, seeing, hearing, speaking, learning?  Yes  No  
NOTE: If you mark "Yes", you will be identified as an individual who meets the affirmative action criteria for persons with disabilities. A detailed definition is reflected below.

5. **Do you have a physical, mental, or other health condition that has lasted six (6) or more months** and which limits the kind or amount of work you can do at a job?  Yes  No  
NOTE: This question is included to maintain consistency with the federal census data. If you mark this question and do not answer 4 as "Yes", you will not meet the definition for persons with disabilities since it states that the disability must be permanent.

I certify that this information is true and accurate to the best of my knowledge.

\_\_\_\_\_                      \_\_\_\_\_  
Date                              Your Signature

### Affirmative Action Definitions

**American Indian or Alaskan Native.** A person with origins in any of the original peoples of the North America and who maintains cultural identification through documented tribal affiliation or community recognition.

**Asian or Pacific Islander.** A person with origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. For example, China, Japan, Korea, Pakistan, the Philippine Republic, and Samoa.

**Black/African-American.** A person with origins in any of the Black racial groups of Africa.

**Hispanic.** A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin regardless of race. For example, persons from Brazil, Guyanan, or Surinam would be classified according to their race and would not necessarily be included in the Hispanic category. This category does not include persons from Portugal, who should be classified according to race.

**White/Caucasian.** A person with origins in any of the original people of Europe, North Africa, or the Middle East.

**Disabilities.** For Affirmative Action purposes, people with disabilities are persons with a permanent physical, mental, or sensory impairment which substantially limits one or more major life activities. Physical, mental, or sensory impairment means: (a) any physiological or neurological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the body systems or functions; or (b) any mental or psychological disorders such as mental retardation, organic brain syndrome, emotional or mental illness, or any specific learning disability. The impairment must be material rather than slight, and permanent in that it is seldom fully corrected by medical replacement, therapy or surgical means.

**Disabled veteran.** A person entitled to disability compensation laws administered by the U.S. Department of Veterans Affairs for disability rated at 30 percent or more, or a person whose discharge or release from active duty was for a disability incurred or aggravated in the line of duty.

**Vietnam-era veteran.** A person who served on active duty for a period of more than 180 days, any part of which occurred between August 5, 1964, and May 7, 1975, and was discharged or released from duty with other than a dishonorable discharge.