

Equal Employment Opportunity Survey

For Statistical Use Only

To All Applicants:

The following requested information in no way affects you as an individual applicant. This information will be used to find out how effective our recruitment efforts are in reaching all segments of the population and in validation of our selection methods, and for the purpose of Federal Equal Employment Opportunity reporting. Please give us your cooperation by completing this voluntary questionnaire.

Name (First, Middle Initial, Last)

Social Security Number

Date of Birth

A. Sex

Male Female

B. Age

19 or less 20-29 30-39 40-49 50-59 60-69 70+

C. Highest Level of Education

0-8 years

9-12 years

High School Graduate/GED

Post High School, Vocational or Business School

College, less than B.A. or B.S. Degree

B.A., B.S. or Similar Degree

M.A. or Similar Professional Degree

PHD or Similar Professional Degree

MD or Similar Professional Degree

D. Which Racial/Ethnic Group do you consider yourself a member?

American Indian or Alaskan Native

Asian or Pacific Islander

Black

Hispanic

White

Other _____

E. Do you have a disability?

No

Amputee

Deaf

Diabetes

Epilepsy

Cardiac

Paralysis

Other _____

Blind

F. Are you a Veteran of one of the armed forces? Which branch?

Vietnam _____

Korean _____

Other (specify) _____

Persian Gulf _____

Operation Desert Storm _____

G. How did you learn about this job?

NE Workforce Development

Other State Agency

Present Employee

School (specify) _____

KS Workforce Development

Newspaper or Periodical (specify) _____

Friend

Other (specify) _____
