

GREATER ALTOONA CAREER & TECHNOLOGY CENTER

1500 Fourth Avenue, Altoona PA 16602

AFFIRMATIVE ACTION SURVEY

The following statistical information is required for compliance with Federal laws assuring Equal Employment Opportunity without discrimination in its educational programs, activities, or employment practices, based on race, color, national origin, sex, sexual orientation, disability, age, religion, ancestry, union membership, or any other legally protected classification. *The information requested is voluntary and will remain separate from your application for employment. It will not be considered in evaluating your application for employment.*

Today's Date:

Social Security Number

Birthdate

Month/Day/Year

- -

Month/Day/Year

First Initial

Middle Initial

Last Name

Address

City

State

Zip

- A = American Indian/Alaskan Native (not Hispanic) Male
- B = American Indian/Alaskan Native (not Hispanic) Female
- C = Asian (not Hispanic) Male
- D = Asian (not Hispanic) Female
- E = Black or African American (not Hispanic) Male
- F = Black or African American (not Hispanic) Female
- G = Hispanic (any race) Male
- H = Hispanic (any race) Female
- I = Multi-Racial (not Hispanic) Male
- J = Multi-Racial (not Hispanic) Female

- K = White (not Hispanic) Male
- L = White (not Hispanic) Female
- M = Native Hawaiian or other Pacific Islander (not Hispanic) Male
- N = Native Hawaiian or other Pacific Islander (not Hispanic) Female

EEO Code:

Y/N

Do you have an impairment which substantially limits one or more of a person's life activities?

Are you a disabled veteran? (30% V.A. Compensation or discharged because of disability incurred in line of duty.)

Did you serve 180 days of Active Duty between 8/15/64 and 5/7/75?

Referral Source REFERRAL CODES: A = Walk in/Write In C = State Employment Agency E = Minority Referral Agency
B = Ad Response D = College Placement Office F = Private Employment

Job you are applying for: _____

Applicant Signature _____