

Equal Employment Opportunity (EEO) Information

PLEASE COMPLETE AND SUBMIT THIS FORM WITH YOUR APPLICATION FORM.
COMPLETION OF ANY OF THE INFORMATION ON THIS FORM IS **OPTIONAL**.

The information requested on this form is voluntary and will be used solely and exclusively for the purpose of EEO compliance and reporting information concerning applicants and appointees to State and Federal Civil Rights Agencies in conformance with national and state laws, rules and guidelines. SANDUSKY COUNTY is required to keep this form separate from all applications upon completion.

Classification/job for which you are applying: _____

Name: _____ Social Security Number _____ - _____ - _____

Birth Date: _____ Male Female

CHECK ONE:

- A. White Persons having origin in any of the original people of Europe, North Africa or the Middle East.
- B. Black People having origin in any of the Black racial groups.
- C. Hispanic Persons of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.
- D. American Indian
 or Alaskan Persons having origin in any of the original peoples of North America and who maintain cultural identification through tribal affiliation or community recognition.
- E. Asian/Pacific
 Islander Persons having origin in any of the original peoples of the Far East, South East Asia, Indian Subcontinent or Pacific Island.
- F. Handicap Individual with physical condition that limits his/her ability to attain employment.
- G. Veteran Honorable service with one of the armed services.

SIGNED: _____ DATE: _____

Note: The form and content of this form were derived in compliance with Ohio Civil rights Commission R 4112-5-04 which permits employers to gather and compile the information contained above.