

**CITY OF PORT ORCHARD
AFFIRMATIVE ACTION DATA**

IT IS THE POLICY OF THE CITY OF PORT ORCHARD TO PROVIDE EQUAL OPPORTUNITY IN ALL TERMS, CONDITIONS AND PRIVILEGES TO EMPLOYMENT FOR ALL QUALIFIED JOB APPLICANTS AND EMPLOYEES WITHOUT REGARD TO RACE, RELIGION, COLOR, NATIONAL ORIGIN, SEX, AGE, MARITAL STATUS, PHYSICAL, MENTAL OR SENSORY DISABILITY, OR VETERAN STATUS INCLUDING VETERANS AND DISABLED VETERANS. TO HELP US COMPLY WITH GOVERNMENT RECORD KEEPING, REPORTING, AND OTHER LEGAL REQUIREMENTS, PLEASE COMPLETE THE AFFIRMATIVE ACTION DATA BELOW. PROVIDING THIS INFORMATION IS VOLUNTARY AND WILL BE KEPT IN A CONFIDENTIAL FILE SEPARATE FROM THE APPLICATION FORM.

POSITION APPLIED FOR : _____

DATE: _____

NAME: _____

PHONE: _____

SOCIAL SECURITY NUMBER: _____

DATE OF BIRTH: _____

SEX: MALE FEMALE

DISABLED YES NO

DISABLED VETERAN YES NO

DISABLED VIETNAM VETERAN YES NO

RACE: (CHECK ONE ONLY)

WHITE

BLACK

ASIAN/PACIFIC ISLANDER

AMERICAN INDIAN/ALASKAN NATIVE

OTHER (PLEASE SPECIFY) _____

EHTNICITY: (CHECK ONE ONLY)

HISPANIC NON HISPANIC