



Application Number: _____

Please select your choices below:

SEX: (select one) Male Female

ETHNIC GROUP: (select one)
 Hispanic or Latino
 Not Hispanic or Latino

RACE: (select any that apply)
 American Indian or Alaska Native
 Asian
 Black or African American
 Native Hawaiian or Other Pacific Islander
 White

EDUCATION: (select one)
 9th to 12th Grade
 High School Graduate or Greater
 Unknown

VETERAN: (select one) Veteran Non-Veteran

CAREER CONNECTION: (select one)
 Preapprenticeship
 Military Veteran
 YouthBuild
 Career Center Referral

8th Grade or Less
 High School Equivalency
 Post-Secondary or
Technical Training

None
 Technical Training School
 Job Corps
 HUD/StepUp
 School to Registered
Apprenticeship

Your name: _____

Date: _____

Why are you being asked to complete this form?

Because we are a sponsor of a registered apprenticeship program and participate in the National Registered Apprenticeship System that is regulated by the U.S. Department of Labor and Title 29 Code of Federal Regulations, Part 30, which is titled "Equal Employment Opportunity in Apprenticeship", we must reach out to and provide equal opportunity in apprenticeship to qualified people and maintain records of all apprentice applicants' demographics.^[1] To help us learn how well we are doing, we are asking you to voluntarily disclose the information above. Completing this form is voluntary, but we hope that you will choose to fill it out. Any answer you give will be kept private and will not be used against you in any way.

^[1] Part 30 – Equal Employment Opportunity in Apprenticeship. For more information about this form or the equal employment obligations of Federal contractors, visit the U.S. Department of Labor's Office of Apprenticeship website at <https://www.doleta.gov/OA/eo/>.