Voluntary EEO Self Identification Form

I am not a protected veteran.

I decline to answer.

Fublic Facilities District

Public Facilities District

The information provided will only be used ways that are

not inconsistent with the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended.

410 Fourth Avenue North Edmonds, WA 98020 careers@ec4arts.org www.ec4arts.org

Edmonds Public Facilities District/Edmonds Center for the Arts is an equal opportunity employer and as required by law, we must record certain information to be made a part of our affirmative action program.

Applicants for employment are invited to participate in the affirmative action program by reporting their status as a minority. In extending this invitation, we advise you that: (a) workers (applicants) are under no obligation to respond but may do so in the future if they choose; (b) responses will remain confidential within the human resource department; and (c) responses will be used only for the necessary information to include in our affirmative action program. We are a company that values diversity. We actively encourage women, minorities, veterans and disabled employees to apply

, ,	inorities, veterans and disabled employees to apply.	ourly that values			
Refusal to provide this information will have	e no bearing on your application and will not subject you to	o any adverse treatment.			
Date:	te: Position applying for:				
Name:					
Gender: Male Female	I decline to answer				
Race/Ethnicity: Please check one of the	ne descriptions below corresponding to the ethnic grou	p with which you identify.			
Hispanic or Latino A person of	Cuban, Mexican, Puerto Rican, South or Central America	a, or other Spanish culture or origin regardless of race.			
○ White (Not Hispanic or Latino)	A person having origins in any of the original peoples	of Europe, the Middle East or North Africa.			
○ Black or African American (Not H	ispanic or Latino) A person having origins in any of	the black racial groups of Africa.			
Native Hawaiian or Other Pacific (not Hispanic or Latino)	A person having origins in any of the people	es of Hawaii, Guam, Samoa or other Pacific Islands.			
Asian (Not Hispanic or Latino)	A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian Subcontinent, including for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.				
American Indian or Alaska Native (Not Hispanic or Latino)	 A person having origins in any of the original peoples America) and who maintain tribal affiliation or comm 				
○ Two or More Races (Not Hispanic	or Latino) All persons who identify with more than	one of the above five races.			
○ I decline to answer	,				
Voluntary Self-Identification of Vete					
Veteran classifications are defined as for	ollows:				
for the receipt of military retired pay w	ring: (a) a veteran of the U.S. military, ground, naval or a ould be entitled to compensation) under laws administe d from active duty because of a service connected disab	ered by the Secretary of Veterans Affairs; or (b) a			
Recently separated Veteran- means a active duty in the U.S. military, ground	any veteran during the three-year period beginning on t , naval or air service.	the date of such veteran's discharge or release from			
	adge Veteran- means a veteran who served on active didition for which a campaign has been authorized under				
	n- means a veteran who, while serving on active duty in operation for which an Armed Forces service medal wa				
you were absent from employment in the position you would have been obt	al rights under USERRA- the Uniformed Services Employ order to perform service in the uniformed service, you n ained with reasonable certainty if not for the absence do byment and Training Service (VETS), toll-free, at 1-866-4-	nay be entitled to be reemployed by your employer in ue to service. For more information, call the U.S.			
I identify as one or more of the class.	assifications of protected veteran listed above.	Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment.			

Voluntary Self-Identification of Disability

Why are you being asked to complete this?

Because we do business with the government, we must reach out, hire, and provide equal opportunity to qualified persons with disabilities as defined under section 503 of the Rehabilitation Act of 1973, as amended. To help us measure how well we are doing, we are asking you to tell us if you have a disability or have ever had a disability.

Completing this is voluntary, but we hope you will choose to fill it out. Any answer you provide will be kept private and will not be used against you in any way.

How do I know if I have a disability?

You are considered to have a disability if you have a physical or mental impairment or medical condition that substantially limits a major life activity, or if

you have a hist	ory or record of such	an impairment or medical co	ondition.	,
Disabilities incl	ude, but are not limit	ed to:		
-Blindness -Deafness -Cancer -Epilepsy	-Autism -Cerebral palsy -HIV/AIDS -Muscular dystrophy	-Bipolar disorder -Major depression -Schizophrenia -Missing limbs or partially missing limbs	-Post-traumatic stress disorder (PTSD) -Multiple sclerosis (MS) -Diabetes -Intellectual disability (previously called mental retardation)	-Obsessive compulsive disorder -Impairments requiring the use of a wheelchair
Please check o	ne of the following:			
Yes, I hav	e a disability (or previ	ously had a disability)		
○ No, I do n	ot have a disability			
O I decline t	to answer			
Reasonable A	ccommodation Notic	ce		
accommodatio	on to apply for a job o	r to perform your job. Examp	dation to qualified individuals with disabilities. oles of reasonable accommodation include mak sing a sign language interpreter or using specia	king a change to the application process or
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Please return by emailing with your application package to careers@ec4arts.org