

EEO-1 Voluntary Self Identification Form

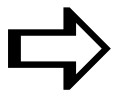
Jobsite Employer: _____

Name (Print): _____

Last four of Social Security Number: XXX-XX- _____

Landrum Professional Employer Services and your worksite employer are equal opportunity employers committed to providing a working environment where all qualified individuals are considered for employment without regard to race, color, national origin, religion, gender, age, disability, or veteran's status. To fulfill our EEO-1 reporting obligations, we request your voluntary completion on the information below. Failure to complete this form will have no bearing on the processing or status of your application and will in no way impact upon your consideration for employment with Landrum Professional Employer Services or its clients. If you do not self-identify, identification will be made visually pursuant to EEO-1 reporting requirements. The information collected will be kept confidential and will only be used to report in summary fashion for compliance purposes. When reported, data will not identify any specific individual.

GENDER:	<input type="checkbox"/> Male <input type="checkbox"/> Female
ETHNICITY:	<input type="checkbox"/> <i>Hispanic / Latino:</i> A person of Cuban, Mexican, Puerto Rican, South or Central America, or other Spanish culture or origin, regardless of race. <input type="checkbox"/> <i>Not Hispanic / Latino</i>
RACE:	<input type="checkbox"/> <i>White:</i> A person having origins in any of the original peoples of Europe, the Middle East or North America. <input type="checkbox"/> <i>Black or African American:</i> A person having origins in any of the Black racial groups of Africa. <input type="checkbox"/> <i>Native-Hawaiian or other Pacific Islander:</i> A person having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands. <input type="checkbox"/> <i>Asian:</i> 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 Viet Nam. <input type="checkbox"/> <i>American Indian or Alaskan Native:</i> A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment. <input type="checkbox"/> <i>Two or More Race (Not Hispanic or Latino):</i> All persons who identify with more than one of the above races.
VETERAN STATUS:	<input type="checkbox"/> <i>I am not a Veteran</i> <input type="checkbox"/> <i>Special Disabled Veteran:</i> (i) A veteran of the US military, ground naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Department of Veterans' Affairs for a disability (A) rated at 30 percent or more, or (B) rated at 10 or 20 percent in the case of a veteran who has been determined under Section 38 USC 3106 to have a serious employment handicap of (ii) a person who was discharged or released from active duty because of a service-connected disability. <input type="checkbox"/> <i>Veteran of the Vietnam-era:</i> A person who: (i) served on active duty in the US military, ground, naval or air service for a period of more than 180 days, and show was discharged or released therefrom with other than a dishonorable discharge, if any part of such active duty was performed: (A) in the Republic of Vietnam between February 28, 1961 and May 7, 1975; or (B) between August 5, 1964 and May 7, 1975, in all other cases; or (ii) was discharged or released from active duty in the US military, ground naval or air service for a service-connected disability if any part of such active duty was performed (A) in the Republic of Vietnam between February 28, 1961 and May 7, 1975; or (B) between August 5, 1964 and May 7, 1975 in any other location. <input type="checkbox"/> <i>Other Protected Veterans:</i> Veterans who served on active duty in the US military, ground, naval or air service during a war or in a campaign or expedition for which a campaign badge has been authorized.



Employee Signature: _____

Date: _____