

## HR FORM – 102 SYNERGY SELF-IDENTIFICATION FORM FOR APPLICANT FLOW DATA

Completion of this sheet is voluntary and is not a requirement for employment.

<b>APPLICANT</b>		
Name:	Date:	
Position Applied for:	Gender:	Male:      Female:
<p>It is the policy of Synergy Solutions to provide equal employment opportunity to all employees and applicants for employment without regard to gender, race, color, religion, sexual orientation, national origin, age, disability, or disabled or Vietnam-Era veterans' status.</p> <p>VARIOUS AGENCIES OF THE UNITED STATES GOVERNMENT REQUIRE EMPLOYERS TO COLLECT INFORMATION ON APPLICANTS. INFORMATION REQUESTED ON THIS SHEET IS FOR PURPOSES OF COMPLIANCE WITH THESE RECORDKEEPING REQUIREMENTS AND, TO DETERMINE RECRUITING AND EMPLOYMENT PATTERNS.</p> <p>If you wish to be identified, please provide any of the information requested on this form that you would like to submit. You may submit this information now or at any time in the future. <i>Such information will in no way affect the decision regarding your application for employment. This sheet will be kept confidential and maintained separately from your application form.</i></p>		
<b>ETHNICITY/RACE</b>		
<p><b>American Indian or Alaskan Native:</b> (Persons having origins in any of the original peoples of North, Central and South America, and who maintain tribal affiliation or Community attachment.)</p>	<p>Please check one box only</p>	<p><b>White</b> (People having origins in any of the original people of Europe, Middle East, or Africa.)</p>
<p><b>Asian</b> (Persons having origins in any of the original peoples of the Far East, Southeast Asia or the Indian Subcontinent including, [e.g., Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam])</p>		<p><b>Black or African American</b> (Persons having origins in any of the black racial groups of Africa.)</p>
<p><b>Hispanic or Latino</b> (Persons of Cuban, Mexican, Puerto Rico, South or Central American or other Spanish culture.)</p>		<p><b>Two or More Races</b> (Persons who identify with more than one of the above races.)</p>
<p><b>Native Hawaiian or Other Pacific Islander</b> (Persons having origins in any of the peoples of Hawaii, Guam, Samoa or other Pacific Islands.)</p>		<p><b>Do Not Want To Disclose</b></p>

Please return this form with your completed Employment Application to the Human Resources Representative or to the facility where you submitted your employment application. Thank you.