



Equal Employment Opportunity Form

Application Information

Full Name: _____

Address: _____
Last First M.I.

_____ *Street Address City ZIP Code*

Home Phone: (___ / ___) _____ C.N.I.C. Number: _____

Position Applied for: _____

Voluntary Information

This information is being requested in accordance with regulations. The information is voluntary and will not be used when considering you for employment with our organization.

Racial or Ethnic Group

- | | | |
|--|-----------------------------------|---|
| <input type="checkbox"/> Baloch | <input type="checkbox"/> Pushtoon | <input type="checkbox"/> Punjabi |
| <input type="checkbox"/> Muhajir/Urdu Speaking | <input type="checkbox"/> Sindhi | <input type="checkbox"/> Other, please specify: |

Gender / Disability

- | | | |
|---------------------------------|-------------------------------|--|
| <input type="checkbox"/> Female | <input type="checkbox"/> Male | <input type="checkbox"/> Disability, please explain: |
|---------------------------------|-------------------------------|--|

Military / Armed / Or related Service

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

- | | |
|---------------------------------------|---|
| <input type="checkbox"/> Military | <input type="checkbox"/> Police or related |
| <input type="checkbox"/> Intelligence | <input type="checkbox"/> Other, please specify: |

How did you hear about us?

- | | | |
|--|--|---|
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Organization's Employee | <input type="checkbox"/> Professional Publication |
| <input type="checkbox"/> Job Fair | <input type="checkbox"/> Placement/HR Office | <input type="checkbox"/> YAD Web Site |
| <input type="checkbox"/> Internet Search | <input type="checkbox"/> Other _____ | |