

EQUAL EMPLOYMENT OPPORTUNITY PERSONAL INFORMATION SHEET

Qualified applicants are considered for employment without regard to race, religion, color, sex, national origin, age, marital status, veteran status, or disability. Furthermore, **South Texas Dental Associates, L.P. and Affiliates** is committed to taking affirmative action to employ qualified females, minorities, disabled individuals, and veterans of the Vietnam-era.

In order to comply with Federal/State equal employment opportunity recordkeeping and reporting requirements, we request that you answer the following questions. Completion of this form is voluntary on your part and will not subject you to any adverse treatment. **This form will be kept in a confidential file separate from your employment application and personnel file.**

Last Name	First	Middle	Social Security #
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Gender (check one)	<input type="checkbox"/> Female	<input type="checkbox"/> Male	

RACE/ETHNIC IDENTIFICATION (check one)
<input type="checkbox"/> American Indian or Alaskan Native – All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.
<input type="checkbox"/> Asian or Pacific Islander – All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. (China, India, Japan, Korea, the Philippine Islands and Samoa.)
<input type="checkbox"/> Black (Not of Hispanic origin) – All persons having origins in any of the Black racial groups of Africa.
<input type="checkbox"/> Hispanic – All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin regardless of race.
<input type="checkbox"/> White (Not of Hispanic origin) – All persons having origin in any of the original peoples of Europe, North Africa, or the Middle East.

DISABILITY IDENTIFICATION (check if applicable)
<input type="checkbox"/> Yes <input type="checkbox"/> No (This information will be used only in accordance with Title I of the ADA).
Qualified individual with a disability: All persons who have a physical or mental impairment that substantially limits one or more major life activities; or has a record of impairment; or is perceived as having impairment. Is capable of performing a particular job with reasonable accommodation.

VETERAN IDENTIFICATION (check if applicable)
Do you wish to identify yourself as a Special Disabled Veteran or a Vietnam-era veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a "Special Disabled Veteran"? <input type="checkbox"/> Yes <input type="checkbox"/> No
DEFINITION: "Special Disabled Veteran" means (A) a veteran who is entitled to compensation (or who but for the receipt of military pay would be entitled to compensation) under the laws administered by the Veterans Administration or a disability (i) rated at 30 percent or more, or (ii) rated at 10 to 20 percent in the case of a veteran who has been determined under Section 1506 of Title 38, U.S.C., to have a serious employment handicap or (B) a person who was discharged or released from active duty because of a service-connected disability.
Are you a Vietnam-era Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No
DEFINITION: "Veteran of the Vietnam-era" means a person who served more than 180 days of active military, naval, or air service, any part of which was during the period August 5, 1964 to May 7, 1975, and who (i) was discharged or released there from with other than a dishonorable discharge, or (ii) was discharged from active duty because of a service-connected disability.