



Ursinus College

STAFF CENSUS SHEET

Internal Use Only

Reports to: _____

Job Class (EEOC): _____

SOC Code: _____

Last Name: _____ Department: _____

First Name: _____ Job Title: _____

Street Address: _____

State: _____ Zip Code: _____ Home Phone: _____ Cell Phone: _____

Voluntary Self – Identification Information

Completion of this information is voluntary and is not a requirement. This information will be kept confidential

Gender:

- Male
- Female

Ethnicity:

Hispanic or Latino

Not Hispanic or Latino

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Race:

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Pacific Islander
- White
- Two or more races
- Race Unknown

Residency Status:

- A citizen of the United States
- A noncitizen of the United States
- A lawful permanent resident
- An alien authorized to work in the United States until (date) ____/____/____

Veteran Status:

- I identify as one or more classification of protected veteran
 - Disabled Veteran
 - Recently Separated Veteran (Discharge Date ____/____/____)
 - Active Duty Wartime or Campaign Badge Veteran
 - Armed Forces Service Medal Veteran
- I am not a protected veteran
- I decline to self-identify

Emergency Contact Information:

Name: _____

Relationship: _____

Contact Phone: _____

Contact Email: _____

Contact Address: _____

Signature: _____

Date: ____/____/____