

CASE WESTERN RESERVE UNIVERSITY
CONFIDENTIAL
SELF-IDENTIFICATION FORM

Name _____ Employee No. _____

Position _____ Department _____

Gender:

Male

Female

Veteran Status:

Veteran (other than Vietnam-era)

Vietnam-era veteran

Disabled veteran (Vietnam-era only)
(Please see next page)

Disabled veteran (please see next page)

Race/Ethnicity: Please select only one classification below.

Ethnicity

Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. (If you select Hispanic or Latino, do not select another classification.)

Race

White: (Not Hispanic or Latino) A person having origins in any of the original people of Europe, the Middle East, or North Africa.

Black or African American: (Not Hispanic or Latino) A person having origins in any of the Black racial groups of Africa.

Asian: (Not Hispanic or Latino) 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 Vietnam.

Native Hawaiian or Other Pacific Islander: (Not Hispanic or Latino) A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

American Indian or Alaskan Native: (Not Hispanic or Latino) A person having origins in any of the original people of North and South America (including Central America), and who maintains tribal affiliation or community attachments.

Two or More Races: (Not Hispanic or Latino) All persons who identify with more than one of the above five races.