

**CITY OF NEWARK
Delaware**

AFFIRMATIVE ACTION FORM

Just as some applicants are given tests for employment, the City is periodically evaluated for compliance with Equal Employment Opportunity regulations. In order to assist the City in monitoring its compliance with these regulations, all applicants are requested to complete this form voluntarily. You may refuse to provide any or all of the following information. This information will be kept completely separate from your application and will have absolutely no bearing on the status of your application. This information will be used solely for record keeping purposes.

NAME: _____

DATE: _____

POSITION APPLIED FOR: _____

GENDER: MALE _____
 FEMALE _____

ARE YOU OVER 18? YES _____
 NO _____

MILITARY VETERAN? YES _____
 NO _____

ETHNICITY:
 HISPANIC OR LATINO (ANY RACE) _____
 NOT HISPANIC OR LATINO (ANY RACE) _____

RACE (MARK ONE OR MORE):
 AMERICAN INDIAN OR ALASKA NATIVE _____
 ASIAN _____
 BLACK OR AFRICAN AMERICAN _____
 WHITE _____

REFERRAL SOURCE (PLEASE LIST NAME, IF APPROPRIATE):

WALK IN	_____	COMMUNITY AGENCY	_____
SPECIAL PUBLICATION	_____	JOB POSTING	_____
CITY EMPLOYEE	_____	STATE EMPLOYMENT AGENCY	_____
PRIVATE EMPLOYMENT AGENCY	_____	COLLEGE PLACEMENT OFFICE	_____
JOB FAIR	_____	RADIO	_____
NEWSPAPER	_____	INTERNET	_____
OTHER (PLEASE SPECIFY)	_____	CITY WEBSITE	_____