EMPLOYEE DEMOGRAPHIC DATA SHEET

TO:	New EMU Employees
Welcome to E you a successi	eastern Michigan University. We are pleased that you have joined the institution and wish ful time here.
	on that is required to provide regular reports on our workforce to State and Federal ask that you review the following questions and provide a response if they apply.
Staff 1	ave any questions on any of the information requested, please contact the appropriate office: Human Resources: (734) 487-3431 emic Human Resources: (734) 487-0076
Thank you for	your assistance!
NAME:	
L	ast First
JOB TITLE:	DEPT.:
RACE/ETHN	NICITY:
Are you Hisp	anic or Latino? Please check one.
Yes, Hispa	spanic or Latino. nic or Latino: a person of Cuban, Mexican, Chicano, Puerto Rican, South or Central other Spanish culture or origin, regardless of race.
What is your	race? You may select one or more races.
Africa. Black or A American I America (incl Asian: a pe Indian subcon the Philippine Native Hav	erson having origins in any of the original peoples of Europe, the Middle East, or North frican American: a person having origins in any of the black racial groups of Africa. Indian or Alaska Native: a person having origins in any of the original peoples of North auding Central America), and who maintains tribal affiliation or community attachment. It is a reson having origins in any of the original people of the Far East, Southeast Asia, or the tinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, Islands, Thailand, and Vietnam. Vaiian or Other Pacific Islander: a person having origins in any of the original peoples of the Samoa, or other Pacific Islands.
SEX: □	Male Female BIRTHDATE:/
VETERAN S	TATUS: (check all that apply) □ No Military Service □ Vietnam Era Veteran—More than 180 days of active military service

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HANDICAP/DISABILITY STATUS:

o you wish to identify yourself as a person with a disability as defined by the Americans With isabilities Act? Yes No		
Is there any reason you cannot perform all of the job functions for which you have been hired? \Box Yes \Box No		
yes, what are the accommodations you are requesting at this time to assist you in performing ach functions?		
ave you made your supervisor aware of this request? Yes No		