

CAPISTRANO UNIFIED SCHOOL DISTRICT

San Juan Capistrano, California

PERSONAL INFORMATION

Date: _____ Home #: () _____

Social Security # _____ Cell #: () _____

Male _____ Female _____ Date of Birth: _____

Name: _____
(Last) (First) (Middle) (Maiden)

Address _____
(Street Name) (City) (Zip Code)

Email Address: _____

PERSONS TO BE CONTACTED IN THE EVENT OF AN EMERGENCY

1. _____
Name Relationship Area Code/Phone Number

Address City State Zip Code

2. _____
Name Relationship Area Code/Phone Number

Address City State Zip Code

EMPLOYEE RACE/ETHNICITY INFORMATION:

New federal guidelines require that we gather race/ethnicity information on all new employees in a two part question. Please complete the information listed below:

What is your ethnicity? (Please select one):

Hispanic or Latino (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race)
 Not Hispanic

What is your race? (You may select up to five racial categories)

The above part of the question is about ethnicity, not race. No matter what you selected above, please continue to answer the following by marking one or more boxes to indicate what you consider your race(s) to be.

American Indian or Alaskan Native (100) (Persons having origins in any of the original People of North, Central or South America)
 Chinese (201)
 Japanese (202)
 Korean (203)
 Vietnamese (204)
 Asian Indian (205)
 Laotian (206)
 Cambodian (207)
 Hmong (208)
 Other Asian (299)
 Hawaiian (301)
 Guamanian (302)
 Samoan (303)
 Tahitian (304)
 Other Pacific Islander (399)
 Filipino/Filipino American (400)
 African American or Black (600)
 White (700) (Persons having origins in any of the original peoples of Europe, North Africa, Northwestern Asia or the Middle East)