

CUSTOMER NAME: _____

DATE: _____

CIRCLE ONE: **SEWSD** **EWSD** **BPSD** **SWWSD** **NWWSD**

WWD CIVIL RIGHTS COMPLIANCE

This institution is an equal opportunity provider and employer. Discrimination is prohibited by Federal Law. To file a complaint of discrimination, write USDA, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue S.W., Washington D.C. 20250-9410 or call (800) 877-8339 (Voice) or (202) 720-2600 (TDD). Or email complaint to: program.intake@usda.gov.

The following information is requested by the Federal Government in order to monitor compliance with Federal Laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the ethnicity, race, and gender of the individual applicants on the basis of visual observation or surname.

ETHNICITY:

_____ Hispanic or Latino

_____ Not Hispanic or Latino

RACE:

_____ American Indian/Alaskan Native

_____ Asian

_____ Black or African American

_____ Native Hawaiian or Other Pacific Islander

_____ White

_____ Other

GENDER: _____ Female _____ Male