



SELF-IDENTIFICATION FORM FOR APPLICANT FLOW DATA

It is the policy of ARAMARK Corporation to provide equal employment opportunity to all employees and applicants for employment without regard to gender, race, color, religion, sexual orientation, national origin, age, disability or disabled or Vietnam-Era veterans' status.

VARIOUS AGENCIES OF THE UNITED STATES GOVERNMENT REQUIRE EMPLOYERS TO COLLECT INFORMATION ON APPLICANTS. INFORMATION REQUESTED ON THIS SHEET IS FOR PURPOSES OF COMPLIANCE WITH THESE RECORDKEEPING REQUIREMENTS AND TO DETERMINE RECRUITING AND EMPLOYMENT PATTERNS. If you wish to be identified, please provide any of the information requested on this form that you would like to submit. You may submit this information now or at any time in the future. Such information will in no way affect the decision regarding your application for employment. This sheet will be kept confidential and maintained separately from your application form.

Completion of this sheet is voluntary and is not a requirement for employment.

NAME: _____

DATE: _____

POSITION APPLIED FOR: _____

RACE: <i>(Please check only one)</i>		GENDER:
<input type="checkbox"/> American Indian or Alaskan Native (Persons having origins in any of the original peoples of North, Central and South America and who maintain tribal affiliation or Community attachment.)	<input type="checkbox"/> Native Hawaiian or Other Pacific Islander (Persons having origins in any of the peoples of Hawaii, Guam, Samoa or other Pacific Islands.)	<input type="checkbox"/> Female
<input type="checkbox"/> Asian (Persons 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)	<input type="checkbox"/> White (People having origins in any of the original people of Europe, Middle East or Africa.)	<input type="checkbox"/> Male
<input type="checkbox"/> Black or African American (Persons having origins in any of the black racial groups of Africa.)	<input type="checkbox"/> Two or More Races (Persons who identify with more than one of the above races.)	
<input type="checkbox"/> Hispanic or Latino (Persons of Cuban, Mexican, Puerto Rico, South or Central American or other Spanish culture.)	<input type="checkbox"/> Do Not Want to Disclose	

Please return this form with your completed Employment Application to the Human Resources Representative or other contact person at the facility where you submitted your employment application.
 Thank you.