

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

Please answer BOTH parts A and B.

PART A:

**Are you Hispanic/Latino?** *(Choose check only one)*

\_\_\_\_\_ **No, not Hispanic / Latino**

\_\_\_\_\_ **Yes, Hispanic / Latino** (A person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin, regardless of race.)

Part A of the question is about ethnicity, not race. Regardless of what you selected in Part A, **please answer Part B** by marking one or more boxes to indicate what you consider your race to be.

PART B:

**What is your race?** *(Please check one or more)*

\_\_\_\_\_ **American Indian or Alaska Native** (A person having origins in any of the original peoples of North and South America, including Central America.)

\_\_\_\_\_ **Asian** (A person 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.)

\_\_\_\_\_ **Black or African-American** (A person having origins in any of the black racial groups of Africa.)

\_\_\_\_\_ **Native Hawaiian or Other Pacific Islander** (A person having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands.)

\_\_\_\_\_ **White** (A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.)

NOTE: Both parts A and B **MUST** be completed. We encourage you to select an answer from **both** parts. If either part (A or B) is not answered, the U.S. Department of Education **requires** the school district to supply an answer on your behalf.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_