

DIOCESE OF SHREVEPORT
EEOC EMPLOYEE IDENTIFICATION FORM

*****PLEASE PRINT*****

EMPLOYEE NAME:

GENDER:

MALE

FEMALE

RACE:

Select ONE

WHITE (NOT OF HISPANIC ORIGIN)

BLACK (NOT OF HISPANIC ORIGIN)

HISPANIC

ASIAN OR PACIFIC ISLANDER

AMERICAN INDIAN OR ALASKAN NATIVE

JOB CATEGORY:

Select ONE

OFFICIAL/MANAGER

PROFESSIONAL

TECHNICIAN

SALES WORKER

OFFICE/CLERICAL

CRAFT WORKER (SKILLED)

OPERATIVE (SEMI-SKILLED)

LABORER (UNSKILLED)

SERVICE WORKER