SELF-IDENTIFICATION FORM

Distri	ct / Charte	er		
Federa	ıl Governn	nent and, in California, to the	e Cali	d to report race and ethnicity data about our staff to the fornia Department of Education. The government uses ses of federal and state funding.
federa on pric self-id	l law requior knowled	ires that the district designate lge and observation; this pra- n is preferable but are require	e anoth ctice i	the new requirements. If you do not self-identify, ner staff person to choose one or more categories based s known as Observer-Identification. We firmly believe implement Observer-Identification as a last resort to
Please	assist us b	by providing the requested in	forma	tion. Female Male Undeclared
Ethnic	Undeclar Hispanic or a person	or Latino of any race (a perso		was born or lives in South America, Central America, or Mexico om South America, Central America, or Mexico)
		African American		Korean
		American Indian or Alaskan		Laotian
		Asian Indian		Other Asian
		Cambodian		Other Pacific Islander
		Chinese		Pacific Islander
		Filipino		Samoan
		Guamanian		Tahitian
		Hawaiian		Vietnamese
		Hmong		White
		Japanese		
Race r	ot include	ed? Please specify:		
□Yes	\Box 1	No		two or more of the above listed groups)?
Thank	you in ad	vance for helping us to collec	et this	new required information.
Signature				Date
Print N	Name		_	