Standard Form 181 (Rev. 5-82) U.S. Office of Personnel Management FPM Supplement 298-1

## **RACE AND NATIONAL ORIGIN IDENTIFICATION**

FPM Supplement 298-1	(Please read the ins	structions and Priva	acy .	Act	Stat	eme	nt	bef	ore	е со	mpleting form)	
Agency Use Only	Name (Last, First, Middle Initial)	Socia	Social Security Number Bi								Birthdate (Month & Year)	
				-		-						
Privacy Act Stateme	ent			•	•					•		
You are requested to furnish this information under the authority of 42 U.S.C. § 2000e-16, which requires that Federal employment practices be free from discrimination and pro-		the employing agency will attempt to identify your race and national origin by visual perception.										
vide equal employment opporthis information is in accordar merce Directive 15, "Race an	You are requested to furnish your Social Security Number (SSN) under the authority of Executive Order 9397 (November 23, 1043). That Order requires agencies to use the SSN											
Statistics and Administrative Reporting."		ber 22, 1943). That Order requires agencies to use the SSN for the sake of economy and orderly administration in the										
This information will be used in planning and monitoring equal employment opportunity programs and to identify employees for inclusion in skill banks and referral pools.  Your furnishing this information is voluntary. Your failure to do so will have no effect on you or on your Federal employment. If you fail to provide the information, however, then		maintenance of personnel records. Because your personnel records are identified by your SSN, your SSN is being requested on this form so that the other information you furnish on this form can be accurately included with your records. Your SSN will be used solely for that purpose. Your furnishing of your SSN is voluntary and failure to furnish it will have no effect on you; failure to provide it, however, may result in it being obtained from other agency sources.										
Specific Instructions: The cate to identify your basic racial and n you are of mixed racial and/or na	self by the category with which you most closely identify yourself. Place an "X" in the box next to the appropriate category. NOTE: Mark <b>only ONE</b> box.											
NAME OF CATEGORY (Mark <b>ONE</b> only)	3 , , , ,	DEFINITION OF CATEGORY										
A American Indian or Alaskan Native	Categories for Use in All Jurisdictions Except Hawaii* and Puerto Rico A person having origins in any of the original peoples of North America, and who maintains cultural identification through community recognition or tribal affiliation.											
B Asian or Pacific Islander		of the original peoples of the Far East, Southeast Asia, the cific Islands. This area includes, for example, China, India,										
C Black, not of Hispanic origin		igins in any of the black racial groups of Africa. Does not include persons Rican, Cuban, Central or South American, or other Spanish cultures or nic).										
D Hispanic	•	on of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish s or origins. Does not include persons of Portugese culture or origin.										
White, not of Hispanic origin	East. Does not include person	of the original peoples of Europe, North Africa, or the Middle s of Mexican, Puerto Rican, Cuban, Central or South American, rigins (see Hispanic). Also includes persons not included in										
	Categories for Use in Puerto Rico											
D  Hispanic	•	o Rican, Cuban, Central or South American, or other Spanish ficial duty station is in Puerto Rico. Does not include persons of n.										
Y Not Hispanic in Puerto Rico	•	rto Rican, Cuban, Central or South American, or other Spanish ial duty station is in Puerto Rico.										