

BACKGROUND SURVEY QUESTIONNAIRE 79-2

GENERAL INSTRUCTIONS

The information from this survey is used to help insure that agency personnel practices meet the requirements of Federal law. Your responses are voluntary. Please answer each of the questions to the best of your ability. Please print entries in pencil or pen. Use only capital letters. Read each item thoroughly before completing the appropriate code number in each box.

Name (Last, First, MI)

Position for which you are applying

Date (Month, Day, Year)

PRIVACY ACT INFORMATION GENERAL

This information is provided pursuant to Public Law 93-579 (Privacy Act of 1974), December 31, 1974, for individuals completing Federal records and forms that solicit personal information Authority Sections 1302, 3301, 3304, and 7201 of Title 5 of the U.S. Code

PURPOSE AND ROUTINE USES

The information from this survey is used for research and for a Federal equal opportunity recruitment program to help insure that agency personnel practices meet the requirements of Federal law. Address questions concerning this form and its uses to the Director, PRDC, Office of Personnel Management, Washington, D.C. 20415

EFFECTS OF NONDISCLOSURE

Providing this information is voluntary. No individual personnel selections are made based on this information.

INFORMATION REGARDING DISCLOSURE OF YOUR SOCIAL SECURITY NUMBER UNDER PUBLIC LAW 93-579, SECTION 7 (b)

Solicitation of the Social Security Number (SSN) by the Office of Personnel Management is authorized under provisions of Executive Order 9397, dated November 22, 1943. It is used to relate this form with other records that you file with Federal agencies and the Office of Personnel Management

1. Social Security Number

<input type="text"/>									
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(CC 1-9)

2. Year of Birth

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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(CC 10-11)

3. Do you have any Physical Disability?

<input type="text"/>

(CC 12)

1 - Yes
2 - No

4. How did you learn about the particular position or exam for which you are applying?
(You may select up to three choices)

- 01 — Private Information Service
- 02 — Magazine
- 03 — Newspaper
- 04 — Radio
- 05 — TV
- 06 — Poster
- 07 — Private Employment Office
- 08 — State Employment Office (Unemployment Office)
- 09 — Agency Personnel Dept. (Bulletin Board or Other Announcement)

- 10 — Agency or other Federal Government Recruitment at School or College
- 11 — Federal, State or Local Job Information Center
- 12 — Religious organization
- 13 — School or College Counselor or other official
- 14 — Friend or Relative Working for Agency
- 15 — Friend or Relative not Working for Agency
- 16 — Other (Specify) _____

<input type="text"/>	<input type="text"/>
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(CC 13-14)

<input type="text"/>	<input type="text"/>
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(CC 15-16)

<input type="text"/>	<input type="text"/>
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(CC 17-18)

5. Please categorize yourself in terms of the race, sex, and ethnic categories below. First read definitions of subcategories.

DEFINITIONS

The racial and ethnic categories for Federal statistics and administrative reporting are defined as follows:

ETHNICITY:

Hispanic. A person of Mexican, Puerto Rican, Cuban Central or South American, or other Spanish culture or origin, regardless of race

RACE:

American Indian or Alaskan Native. A person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition.

Asian or Pacific Islander. A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands, and Samoa.

Black. A person having origins in any of the black racial groups of Africa.

White. A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

A. Race

- 1 — American Indian or Alaskan native
- 2 — Asian or Pacific Islander
- 3 — Black 4 — White 5 — Other _____

<input type="text"/>

(CC 19)

(Specify)

B. Sex

- 1 — Male
- 2 — Female

<input type="text"/>

(CC 20)

C. Ethnicity

- 1 — Hispanic Origin
- 2 — Not of Hispanic Origin

<input type="text"/>

(CC 21)

FOR AGENCY USE ONLY

Date Received (Mo., Day, Yr.)

<input type="text"/>					
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(CC 22-27)

Occupational Supplemental Code

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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(CC 28-31)

Occupational Series Code

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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(CC 32-36)

Agency Code

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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(CC 37-40)

Location

<input type="text"/>					
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(CC 41-44)