



## CONFIDENTIAL VOLUNTARY SURVEY

Apollo Professional Solutions, Inc. is an Equal Opportunity Employer and does not discriminate based on race, color, religion, sex, age, National origin, disability, veteran status, sexual orientation or any other classification protected by Federal, state or local law.

To help us comply with federal and state Equal Employment Opportunity record keeping, and other legal requirements, we invite you to complete the following information.

Please note that completion of this information is voluntary. Refusal to complete this information will not subject you to adverse treatment. The information you provide is confidential and will be kept separate from your other application information. This information will be used for data reporting requirements and will not be considered in making any employment decisions.

Name:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
Address:	

**Ethnicity/Race Self-Identification/Disability/Veteran Status**  
Please read the descriptions below and indicate any that are applicable:

<input type="checkbox"/> Hispanic, Latino or Spanish	A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race
<input type="checkbox"/> Native American or Alaska Native	A person having origins in any of the original peoples of North and South America and who maintains tribal affiliation or community attachment
<input type="checkbox"/> Asian	A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent
<input type="checkbox"/> Native Hawaii or other Pacific Islander	A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands
<input type="checkbox"/> African American or Black	A person having origins in any of the black racial groups of Africa
<input type="checkbox"/> Caucasian or White	A person having origins in any of the original peoples of Europe, the Middle East, or North Africa
<input type="checkbox"/> Two or more races, not Hispanic or Latino	

Person with a Disability	A person who (1) has a physical or mental impairment that substantially limits one or more major life activities; (2) has a record of such impairment; or (3) is regarded as having such impairment.
<input type="checkbox"/> Yes	

<input type="checkbox"/> Veteran	<p>A person with veteran status can indicate here in accordance with the regulation promulgated under 38 U.S.C. 4212</p> <p><input type="checkbox"/> Check if Special Disabled Veteran  <input type="checkbox"/> Check if Vietnam Era Veteran  <input type="checkbox"/> Recently Separated Veteran  <input type="checkbox"/> Check if other protected Veteran</p>
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Solicitation of this information is in accordance of 5 CFR Section 720, "Federal Equal Opportunity Recruitment Program" (FEORP). As an employer, we comply with government regulations and affirmative action responsibilities.