

AFFIRMATIVE ACTION APPLICANT FORM

AAP - I

Louisiana State University at Alexandria is an affirmative action/equal opportunity employer. The University adheres to the principle of equal educational and employment opportunity without regard to age, race, sex, color, creed, national origin, or qualified handicap. In order to ensure that ethnic groups and women are represented among our applicant population, we are asking you to answer the questions on this sheet. Please answer all questions as accurately as you can. The information that you give us is confidential and will not be available to the office conducting a search of candidates. If you elect not to submit this information, your decision will not be prejudicial to your application.

\_\_\_\_\_ Please indicate that you have chosen not to include this information so we will know that you have not forgotten to do so.

Position \_\_\_\_\_ Department \_\_\_\_\_

Please indicate your race/ethnic category: \_\_\_\_\_

What is your religion? \_\_\_\_\_

Are you a veteran? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are you handicapped? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, specify. \_\_\_\_\_

What is your sex? \_\_\_\_\_ Male \_\_\_\_\_ Female

What is your age? \_\_\_\_\_ Are you a U. S. citizen? \_\_\_\_\_ Yes \_\_\_\_\_ No

Please indicate your highest educational achievement: \_\_\_\_\_

Please return this form to: Office of Human Resource Management  
Louisiana State University at Alexandria  
8100 Highway 71 South  
Alexandria, LA 71302-9121

Date: \_\_\_\_\_