

# Demographic Information Form

The purpose of this form is to gather race, ethnicity, and gender information about persons who register and participate in USDA-funded programs. You are receiving this form because the program you plan to participate in is at least partially USDA-funded. The information you provide will not be used when reviewing your program registration form or when determining whether you are eligible to participate in this program.

This is a voluntary demographic information form. You are not required to provide any of the enclosed demographic information, but we hope you will because the information you provide will be used to improve program offerings, design additional opportunities for program participation, and monitor equal access to this program for eligible persons. Your information will be kept private to the extent permitted by law.

1. **Name (Last, First):** \_\_\_\_\_

2. **County (Only if reside in Iowa):** \_\_\_\_\_

3. **What is your gender?**

Male  Female  Prefer not to respond

4. **What is your ethnicity?**

Hispanic, Latino, or Spanish Origin

Not Hispanic, Latino, or Spanish Origin

Prefer not to respond

5. **What is your race? Please select all that apply.**

American Indian or Alaska Native

Asian

Black or African American

Native Hawaiian or Other Pacific Islander

White

Prefer not to respond

This institution is an equal opportunity provider. For the full non-discrimination statement or accommodation inquiries, go to [www.extension.iastate.edu/diversity/ext](http://www.extension.iastate.edu/diversity/ext).