

Ethnicity

Are you Hispanic or Latino?
Hispanic or Latino (including Spain)?
If yes, please check all that apply below

Which best describes your background?
Central America
Cuba
Mexico
Puerto Rico
South America (excluding Brazil)
Spain
Other
If other, please specify

Regardless of your answer to the prior question, please check one or more of the following groups in which you consider yourself to be a member.

American Indian or Alaska Native (including all Original Peoples of the Americas)

Which best describes your background?
Chippewa
Choctaw
Cherokee
Navajo
Sioux
Other
If other, please specify _____
Are you enrolled? Yes No
If yes, please enter tribal enrollment number _____

Asian (including Indian subcontinent and Phillipines)

Which best describes your background?
China
India
Japan
Korea
Pakistan
Phillipines
Vietnam
Other East Asia
If other, please specify _____
Other Indian Subcontinent
If other, please specify _____
Other Southeast Asia
If other, please specify _____

Black or African American (including Africa and Caribbean)

Which best describes your background?
U.S./African American
Africa
Caribbean
Other If other, please specify _____

Native Hawaiian or Other Pacific Islander (Original Peoples)

Which best describes your background?

Guam

Hawaii

Samoa

Other Pacific Islands (excluding Philippines)

Please specify _____

White (including Middle Eastern)

Which best describes your background?

Europe

Middle East

Other

If other, please specify _____

Do you come from a family with an annual income below established low-income thresholds? See guidelines at <http://aspe.hhs.gov/poverty/09poverty.shtml>.

Yes No Prefer not to answer

Are you the first generation in your family to attend college?

Yes No Prefer not to answer

Do you have a disability (a physical or mental impairment that substantially limits one or more major life activities)?

Yes No Prefer not to answer

Which best describes your background?

Europe

Middle East

Other

If other, please specify

Do you come from a family with an annual income below established low-income thresholds? See guidelines at <http://aspe.hhs.gov/poverty/09poverty.shtml>.

Yes No Prefer not to answer

Are you the first generation in your family to attend college?

Yes No Prefer not to answer

Do you have a disability (a physical or mental impairment that substantially limits one or more major life activities)?

Yes No Prefer not to answer