

## Advisory Committee Diversity Survey Form

Name:

Job Title:

Company Affiliation:

Business Size:

Large (more than 100 employees)

Small (less than 100 employees)

Gender:       Male       Female      Date of Birth:

Racial Ethnic Group:

White (Non-Hispanic)       Black or African American       Two or more races

Hispanic or Latino       Asian       Other:

American Indian/Alaskan Native       Native Hawaiian/Pacific Islander

Contact Information:

Email:

Telephone:

Fax:

Mailing address: