United States OFFICE OF PERSONNEL MANAGEMENT

Form Approved OMB No. 50-RO-616

BACKGROUND SURVEY QUESTIONNAIRE 79-2		
GENERAL INSTRUCTION	3	PRIVACY ACT INFORMATION GENERAL
The information from this survey is used to help insure that agency personnel practices meet the requirements of Federal law. Your responses are voluntary. Please answer each of the questions to the best of your ability. Please print entries in pencil or pen. Use only capital letters. Read each item thoroughly before completing the appropriate code number in each box. Name (Last, First, MI)		This information is provided pursuant to Public Law 93-579 (Privacy Act of 1974), December 31, 1974, for individuals completing Federal records and forms that solicit personal information Authority Sections 1302, 3301, 3304, and 7201 of Title 5 of the U.S. Code PURPOSE AND ROUTINE USES The information from this survey us used for research and for a Federal equal opportunity recruitment program to help insure that agency personnel practices meet the requirements of Federal law. Address questions concerning this form and its uses to the Director, PRDC, Office of Personnel Management, Washington, D.C. 20415 EFFECTS OF NONDISCLOSURE Providing this information is voluntary. No individual personnel selections are made based on this information. INFORMATION REGARDING DISCLOSURE OF YOUR SOCIAL SECURITY NUMBER UNDER PUBLIC LAW 93-579, SECTION 7 (I
Position for which you are applying Date (Month, Day, Year)		Solicitation of the Social Security Number (SSN) by the Office of Personnel Management is authorized under provisions of Executive Order 9397, dated November 22, 1943. It is used to relate this form with other records that you file with Federal agencies and the Office of Personnel Management
Social Security Number	2. Year	
	0) 1 9	1 - Yes
4. How did you learn about the particular position or example 1.	-9)	(CC 10-11) (CC 12) 2 - No e applying?
03 — Newspaper 04 — Radio 05 — TV 06 — Poster 07 — Private Employment Office 08 — State Employment Office (Unemployment Office) 09 — Agency Personnel Dept. (Bulletin Board or Other Announcement) 11 — Federal, State or Local Job Information Center 12 — Religious organization 13 — School or College Counselor or other official 14 — Friend or Relative Working for Agency 15 — Friend or Relative not Working for Agency 16 — Other (Specify) (CC 13-14)		
5. Please categorize yourself in terms of the race, sex, and ethnic categories below. First read definitions of subcategories.		
DEFINITIONS		
The racial and ethnic categories for Federal statistics and administrative reporting are defined as follows:		
ETHNICITY: Hispanic. A person of Mexican, Puerto Rican, Cuban Central o South American, or other Spanish culture or origin, regardless of race		
American Indian or Alaskan Native. A person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition. Asian or Pacific Islander. A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands, and Samoa. Black. A person having origins in any of the black racial groups of Africa. White. A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.		
A. Race 1 — American Indian or Alaskan native B. Sex C. Ethnicity 1 — Hispanic		
2 — Asian or Pacific Islander 3 — Black 4 — White 5 — Other		1 — Male Origin 2 — Not of (20.00)
(CC 19) (Specify) (CC 20) (CC 21) Hispanic Origin		
Date Received (Mo., Day, Yr.) Occupational		Occupational Series Code Agency Code Location
		790.07 0000 200000
(CC 22-27) (CC 28-31) (CC 32-36) (CC 37-40) (CC 41-44)		

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