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	(FOR OFFICE USE ONLY)	

U.S. DEPARTMENT OF AGRICULTURE APPLICANT SUPPLEMENTAL SHEET

Applicants for positions with the U.S. Department of Agriculture (USDA) are requested to provide the following information for statistical purposes only. The information will be used to evaluate USDA'S recruitment and hiring activities. Public Law 93-579 (Privacy Act of 1974) permits solicitation of personal information. **SUBMISSION OF THIS INFORMATION IS VOLUNTARY**. Your failure to do so will not affect the processing of your application. Your cooperation is appreciated.

1.	Which of the following best describes your current employment status? (Check no more than two.)		
	☐ 01 College/university teaching or research		
	□ 02	Private industry	
	□ 03	State/local government	
	04	Federal government	
	□ 05	Member of the military	
	□ 06	Unemployed	
	□ 07	Current USDA employee	
	□ 08	Other:	
2.	Which of the following describes your veteran preference status? (Check one.)		
	□ 01	None 04	10 point compensable
	<u> </u>	5 point 05	10 point other
	□ 03	10 point disability 06	10 point/30% compensable
3.	Which of the following describes your race/national origin? (Check one.)		
	ПА	American Indian/Alaskan Native	
	□В	Asian or Pacific Islander	
	□ c	Black, not of Hispanic origin	
	D	Hispanic	
	□ E	White, not of Hispanic Origin	
	□ Y	Not Hispanic, Puerto Rico	
	□ Q	All Other Asian or Pacific Islander in Hawa	ii
4.	Which of the following best describes your disability status? (Select all that apply.)		
	□ 01	No disability 06	Complete paralysis
	□ 02	Hearing impairment 07	Convulsive disorder
	□ 03	Vision impairment 08	Mental retardation
	□ 04	Missing extremities 09	Mental or emotional illness
	□ 05	Partial paralysis	Severe distortion of limbs and/or spine
		□ 11	I have a disability not listed
5.	Are you?	(Check one.)	
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THANK YOU FOR FILLING OUT THIS FORM

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB number for this information collection is 0505-0009. The time required to complete this information collection is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.