

**BROOKHAVEN NATIONAL LABORATORY
SCIENCE EDUCATION CENTER**

SULI PROGRAM

Applicant Data

Applicant data are important in assessing the effectiveness of our efforts to solicit applications from a diverse population. Your completion and submission of this form will assist us in this regard; however, if you decide not to do so, your choice will not affect our decision regarding your application. We appreciate your cooperation.

Name _____ Date _____

Race

White (not Hispanic or Latino – a person having origins in any of the original peoples of Europe, North Africa, or the Middle East)

Black or African American (not Hispanic or Latino – a person having origins in any of the Black racial groups of Africa)

Hispanic or Latino (a person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin regardless of race)

Asian (not Hispanic or Latino – a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent)

American Indian or Alaskan Native (not Hispanic or Latino – a person having origins in any of the original peoples of North America and who maintain cultural identification through tribal affiliation or community recognition)

Native Hawaiian or other Pacific Islander (not Hispanic or Latino – a person having origins in Hawaii or the Pacific Islands)

Sex _____

Physical/Mental disability (physical or mental impairment that substantially limits one or more major activities--for example, blindness, deafness, or mobility impairment):

Yes No

If yes, explain:

**PLEASE RETURN TO:
Kathy Gurski
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Upton, NY 11973**