

EEO-1 & Affirmative Action Voluntary Self-Identification (Veteran, Gender, Race)

The Equal Employment Opportunity Commission (EEOC) requires all private employers with 100 or more employees as well as federal contractors and first-tier subcontractors with 50 or more employees AND contracts of at least \$50,000 complete an EEO-1 and affirmative action program reports each year. Covered employers must invite employees to self-identify gender and race, and veteran status for required reporting.

This form will be used for EEO-1 and affirmative action reporting purposes only and will be kept separate from all other personnel records only accessed by the Human Resources department. Completing this form is voluntary and will not affect your employment opportunity or the terms or conditions of your current employment. Please return the completed forms to the HR department.

If you choose not to self-identify your race/ethnicity at this time, the federal government requires **Dense Mechanical** to determine this information by visual survey or other available information.

| Last Name | First Name | Middle Initial |
|---|--|---|
| Job Title: | | |
| Date Completed: | | |
| CENIDED. | | |
| GENDER: (Please check one of the op | tions helow) | |
| • | LIONS DCION) | |
| Male | | |
| Female | | |
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| I am a protected vetera | n | |
| I am NOT a protected v | | |
| I do not wish to self-ide | entify | |
| Dense HR Form (Rev Aug 20 | 023) | Page 1 of 2 |



**PROTECTED VETERAN DEFINITION

Protected veteran means a veteran who may be classified as an active duty wartime or campaign badge veteran, disabled veteran, Armed Forces service medal veteran or recently separated veteran.

Active duty wartime or campaign badge veteran means a veteran who served on active duty in the U.S. military, ground, naval or air service during a war or in a campaign or expedition for which a campaign badge has been authorized under the laws administered by the Department of Defense.

Armed Forces service medal veteran means any veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985 (61 FR 1209, 3 CFR, 1996 Comp., p. 159).

Disabled veteran means (1) a veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans Affairs, or (2) a person who was discharged or released from active duty because of a service-connected disability.

Recently separated veteran means a veteran during the three-year period beginning on the date of such veteran's discharge or release from active duty in the U.S. military, ground, naval or air service.



409 E Broadway Enid, Ok 73701 Office: 580-234-7842

www.DenseComfortSolutions.com

Employment Application

Prospective Employer, Dense Mechanical, is an equal opportunity employer dedicated to a policy of non-discrimination in employment on any basis, including race, color, religion, sex (including pregnancy, gender identity, and sexual orientation), national origin, age (40 or older), disability or genetic information.

| | | | Applicant | nformation | | |
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| Address: | | | | | | |
| | Street | Address | | | | Apartment/Unit # |
| | City | | | S | tate | ZIP Code |
| Phone: | | | Emai | | | |
| Date Availa | ıble: | Positio | n Applied for: | | Desire | ed Salary: |
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| • | | ked for this company? | | | | |
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| | | | Edu | cation | | |
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| TRAINING | | NAME OF SCHOOL | CITY & STATE | TYPE OF COURSE | GPA | DID YOU GRADUATE |
| High School Business Scl | | | | | | |
| College or U | | | | | | |
| Additional Co | ourses | | | | | |
| List any Profe | essional | Certification or License | s you hold: | | | |
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| | Provia | e at least 10 years of | work history (attacr | i additional employe | is on a sepai | rate sneet) |
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409 E Broadway Enid, Ok 73701

Office: 580-234-7842

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| Address: | Company: | | Phone | | |
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| Company: | | From | | | |
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| Give below the name of three persons not related to you, whom you have known for at least one year. Name Address How Acquainted & # of Years Phone Number Years () | Reason for Leaving: | | | way we contact: | LI TES LINO |
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