Name: (Last) (First)	**No.**_____ ____ UALR HRS Office Applicant Referral Number
Please print. This is not an application; it will be used for reporting purposes only.	
Social Security Number: _____ - _____ - _____	
Geographical Location of Job Announcement: Local ☐ State ☐ National ☐ International ☐ Source: _____ (i.e. AR Democrat Gazette, etc.)	
Address	
Street City State Zip	
COMPLETION VOLUNTARY: UALR, as a federal contractor, must produce statistical reports on the composition of the University's applicants for employment. No material from this portion of the form shall be used for making decisions on individual applicants nor shall notations be made on any applications.	
Birth date Gender	
*Ethnicity _____ **Race _____	
*Hispanic or Latino (1) Not Hispanic or Latino (2) ** White (WH) Black or African American (BL) Asian (AS) American Indian or Alaska Native (AI) Native Hawaiian or Other Pacific Islander (NH) Two or more races (TW) (Over) HRS 01/08	

Applicant Please Complete

Position Applied for	Requisition Number	Hiring Department	Date