

Ethnicity and Race

Student's Name:

Grade:

Parent/Guardian Signature:

Date:

**Please answer BOTH Question 1 AND Question 2**

**Question 1: Is this student Hispanic/Latino? CHOOSE ONLY ONE ETHNICITY:**

- NO**, not Hispanic/Latino
- YES**, Hispanic/Latino (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)

*\*The above question is about ethnicity, not race. No matter what you selected above, **please continue to answer the following Question 2** by marking one or more boxes to indicate what you consider your student's race to be. **\*\*If you do not choose a race/ethnicity, your failure to do so gives us permission to declare a race/ethnicity based on the visual observations of the attending staff.\*\****

**Question 2. What is the student's race? CHOOSE ONE OR MORE:**

- AMERICAN INDIAN OR ALASKA NATIVE.** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
- ASIAN.** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- BLACK OR AFRICAN AMERICAN.** A person having origins in any of the black racial groups of Africa.
- NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER.** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- WHITE.** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

**Office use only:**

Ethnicity - Choose only one:

\_\_\_\_\_ NOT: Hispanic/Latino

\_\_\_\_\_ Hispanic/Latino

Race — Choose one or more:

American Indian or Alaska Native

Asian

Black or African American

Native Hawaiian or Other Pacific Islander

White

Date:

Staff Signature:

**Additional Requested Information:**

**MILITARY**

<b>Student connected to an Active Duty Military family</b>	<b>Circle One: YES NO</b>
<b>Student connected to a Guard or Reserve Military family</b>	<b>Circle One: YES NO</b>

**PRESCHOOL**

<b>Head Start</b>	<b>Circle One: YES NO</b>	<b>First Class Funded Preschool — Circle One: Yes NO</b>
<b>Center-Based Child Care -</b>	<b>Circle One: YES NO</b>	<b>Home-Based Child Care — Circle One: YES NO</b>
<b>Home Visitation Program —</b>	<b>Circle One: YES NO</b>	<b>Other Preschool — Circle One: YES NO</b>
<b>No Preschool — Check if no Preschool</b>		<b>Special Education Funded — Circle One: YES NO</b>