

**EASTERN SIERRA UNIFIED SCHOOL DISTRICT**  
**EMPLOYEE INFORMATION**

**EMPLOYEE CONTACT INFORMATION:**

NAME: \_\_\_\_\_

HOME/MAILING ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_

SCHOOLSITE/DEPARTMENT: \_\_\_\_\_

**EMERGENCY CONTACTS:**

Name: \_\_\_\_\_ Phone(s): \_\_\_\_\_

Name: \_\_\_\_\_ Phone(s): \_\_\_\_\_

1. Please list any medical conditions: \_\_\_\_\_

\_\_\_\_\_

2. Please list any medications you must take and/or are allergic to \_\_\_\_\_

\_\_\_\_\_

3. Please list the name, address and phone number of your doctor

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

**EMPLOYEE RACE/ETHNICITY INFORMATION:**

New federal guidelines require that we gather race/ethnicity information on all new employees in a two part question. Please complete the information listed below:

**WHAT IS YOUR ETHNICITY? (Please check one):**     Hispanic or Latino (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race)     Not Hispanic or Latino

**WHAT IS YOUR RACE? (Please check up to five racial categories)**

*The above part of the question is about ethnicity, not race. No matter what you selected above, please continue to answer the following by marking one or more boxes to indicate what you consider your race(s) to be.*

American Indian or Alaskan Native(100)  
(Persons having origins in any of the original people of North, Central or South America )

Chinese (201)

Japanese (202)

Korean (203)

Vietnamese (204)

Asian Indian (205)

Laotian (206)

Cambodian (207)

Hmong (208)

Other Asian (299)

Hawaiian (301)

Guamanian (302)

Samoan (303)

Tahitian (304)

Other Pacific Islander (399)

Filipino/Filipino American (400)

African American or Black (600)

White (700) (Persons having origins in any of the original peoples of Europe, North Africa, Northwestern Asia or the Middle East)