

REVISIONS TO DODEA FORM 5012

DoDEA Form 5012 has been revised as follows:

Section 1 (Part after title) Remove, and add, "RETURN COMPLETED FORM TO:
Department of Defense Dependents Schools Human Resources Center 4040 North
Fairfax Drive, Arlington, VA 22203-1634"

New Section, add, "Name (Last, First, Middle) Social Security Number, Birth
Date (YYYYMMDD)"

Section 2 - General Information, Remove, and add new revision, "The
information collected from this questionnaire is used to help insure that
the Department of Defense Dependents Schools (DoDDS) personnel practices
meet the requirements of Federal law. Your responses are voluntary
(underline sentence). This information is used as necessary to plan for
equal employment opportunity throughout the Federal government. It is also
used by the U.S. Office of Personnel Management or employing agency
maintaining the records to locate individuals for personnel research or
survey response and in the production of summary descriptive statistics and
analytical studies in support of the function for which the records are
collected and maintained, or for related workforce studies.

Add, "Privacy Act Statement

AUTHORITY (bold): 42 U.S.C. Section 2000e-16; Office of Management and
Budget 1997 Revisions to the Standards for the Classification of Federal
Data on Race and Ethnicity; 20 U.S.C. 902, 903, and E.O. 9397.

PRINCIPAL PURPOSE (bold): This information is used as necessary to plan for
equal employment opportunity throughout the Federal government. It is also
used by the U. S. Office of Personnel Management or employing agency
maintaining the records to locate individuals for personnel research or
survey response and in the production of summary descriptive statistics and
analytical studies in support of the function for which the records are
collected and maintained, or for related workforce studies.

ROUTINE USES (bold): Release of ethnicity data is authorized within the
Department of Defense upon a demonstrated need to know basis when release is
consistent with the purposes for which the data was collected. Release of
ethnicity data is authorized to agencies outside the DoD by DoD and
Government-wide Systems Notices, which may be found at
<http://www.defenselink.mil/privacy/notices/osd>.

DISCLOSURE (bold): Your disclosure of the information requested on this
form is voluntary. Failure to provide, or delay in providing, the requested
information has no impact on your employment status, but in the instance of
missing information, other agency sources may be used to obtain it.

Number 1. (Questionnaire) remove all, add new revision, "
RACE, ETHNICITY, AND SEX (bold). (Please identify yourself in terms of the
race, ethnicity, and sex categories below:)

CATEGORIES AND DEFINITIONS (bold) RACE (bold):

- 1 - American Indian or Alaska Native (bold). 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.
- 2 - Asian (bold). 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.
- 3 - Black or African American (bold). A person having origins in any of the black racial groups of Africa.
- 4 - Native Hawaiian or other Pacific Islander (bold). A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- 5 - White (bold). A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

ETHNICITY (bold):

- 1 - Hispanic or Latino (bold). A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

Add new section

a. RACE (bold) (Check all that apply)

- 1 - American Indian or Alaska Native
- 2 - Asian
- 3 - Black or African American
- 4 - Native Hawaiian or Other Pacific Islander
- 5 - White
- 6 - Other

b. ETHNICITY (bold)

Are you Hispanic or Latino?

- 1- YES
- 2 - NO

c. SEX (bold)

- M - Male
F - Female

Number 2 - Remove all

Number 3 - **REPORTABLE DISABILITY** (bold), Remove all and add new revision, "
A physical or mental disability is NOT determined by a person's ability to perform his or her work but by a disability, or a history of such disability, which is likely to cause the employee to experience difficulty in obtaining, maintaining or advancing in employment. This does not apply solely to an employee's current position, but applies to the total career life cycle of that employee.
(In the case of multiple disabilities, choose the code which describes the impairment that would most likely result in such difficulties.)

Do you have a physical disability? (bold)

1 - YES

2 - NO

ADD new section, "**HOW DID YOU LEARN ABOUT THE DoDDS EMPLOYMENT OPPORTUNITIES?** (bold)(Check all that apply)

001 - Friend or Relative Working for DoDDS

002 - Friend or Relative not Working for DoDDS

003 - On-Campus Recruitment by DoDDS

004 - Direct Mailing by DoDDS

005 - Government Job Information Center

006 - State Employment Office

007 - Private Information Office

008 - State Rehabilitation Center

009 - Veterans Association/Employment Office

10 - School Placement Officer

0A - Print Advertisement - Name of Publication:

0B - On-line Information - Name of Site:

0C - Professional Conventions/Meeting - Name of Event:

0C - Other (please specify):