## EQUAL EMPLOYMENT OPPORTUNITY COMMISSION **ELEMENTARY-SECONDARY STAFF INFORMATION (EEO-5)**

FORM APPROVED BY OMB NO. 3046-0003 APPROVAL EXPIRES 12/31/2004

This is a joint requirement of EEOC, and the Office for Civil Rights and National Center for Education Statistics of the

Public se		Department of Education.								
DO NOT ALTER INFORMATION PRINTED IN THIS BOX										
NOTE: ALL EMPLOYEES IN VOLID SCHOOL DISTRICT MUST BE INCLUDED ON THIS FORM. Additional Conjug of this										
NOTE: ALL EMPLOYEES IN YOUR SCHOOL DISTRICT MUST BE INCLUDED ON THIS FORM. Additional Copies of this form may be obtained from the address below. Send your full report (the original and one copy of this form) to:										
Total may be becamed from the dudress below.	ina your run repert (the erigine	ar unu one copy or un	101111) 10.							
PART 1. IDENTIFICATION										
PART A. TYPE OF AGENCY WHICH OPERATES THE REPORTING SCHOOL SYSTEM										
☐ Local Public School System ☐ Special or Regional Agency ☐ State Education Agency										
☐ Other (Specify)										
= 0.00 (op.00)										
B. SCHOOL SYSTEM IDENTIFICATION (OMIT IF SAME AS LABEL)										
NAME										
STREET AND NO. OR POST OFFICE BOX	CITY/TOWN	COUNTY	STATE	ZIP						
	C CENEDAL CRAPTOR	Tog								
NUMBER OF SCHOOLS OPERATED	C. GENERAL STATIST  NUMBER OF ANNEXES OPER		OBER 1ST EN	POLI MENT						
NUMBER OF SCHOOLS OPERATED	NUMBER OF ANNEXES OPEN	LES OPERATED OCTOBE		X 131 ENROLLMENT						
				_						
D. REMARKS										

## AUTHORIZATION THE NATIONAL CENTER FOR EDUCATION STATISTICS WILL PUBLISH INFORMATION APPEARING IN PART II, TOTAL COLUMN "A" UNLESS THE DISTRICT SPECIFICALLY WITHHOLDS AUTHORITY TO DO SO. IF THE DISTRICT WISHES TO WITHHOLD SUCH AUTHORITY, CHECK HERE. ☐ AUTHORITY WITHHELD

**EEOC-ORIGINAL** EOC FORM 168A PAGE 1 April 96

PART II. STAFF STATISTICS AS OF (DATE) DISTRICT NAME:					DO NOT INCLUDE ELECTED/APPOINTED OFFICIALS (SEE DEFINITION IN APPENDIX)  DISTRICT ID #:							
	OVERALL TOTALS (SUM OF COL. B THRU K)	STAFF TOTALS										
ACTIVITY ASSIGNMENT CLASSIFICATION		WHITE (NOT OF HISPANIC ORIGIN)	BLACK (NOT OF HISPANIC ORIGIN)	MALE	ASIAN OR PACIFIC ISLANDER	AMERICAN INDIAN OR ALASKAN NATIVE	WHITE (NOT HISPANIC ORIGIN)	BLACK (NOT OF HISPANIC ORIGIN)	FEMALE HISPANIC	ASIAN OR PACIFIC ISLANDER	AMERICAN INDIAN OR ALASKAN NATIVE	
	A	В	C	D	E	F	G	Н	I	J	K	
A. FULL-TIME STAFF												
1. Officials, Administrators, Managers												
2. Principals												
3. Assistant Principal, Teaching												
4. Assistant Principals, Non teaching												
5. Elementary Classroom Teachers												
6. Secondary classroom Teachers												
7. Other Classroom Teachers												
8. Guidance												
9. Psychological												
10. Librarians /Audio Visual Staff												
11. Consultants &Super- visors of Instruction												
12. Other Professional Staff												
13. Teachers Aids												
14. Technicians												
15. Clerical/Secretarial Staff												
16. Service Workers												
17. Skilled Crafts												
18. Laborers, Unskilled												
19. TOTAL (1-18)												
				<b>B. P</b>	ART-TIM	IE STAFI	7					
20. Professional Instructional												
21. All Other												
22. TOTAL (20-21)												
		C. NEW	HIRES	(JULY T	HRU SE	PT. OF T	HE SUR	VEY YE	AR)			
23. Officials, Administrators, Managers												
24. Principals/Asst. Principals												
25. Classroom Teachers												
26. Other Professional Staff												
27. Nonprofessional Staff												
28. TOTAL (23-27)												
CERTIFICATIO										accordance v	with	
accompanying ir	nstructions. Willfully false statements on this report a Phone (Include Area Code)			Typed Name/Title of Person Responsible for Report			Signature					
					Report							