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Form Approved Through 08/31/2015

OMB No. 0925-0002

Program Director/Principal Investigator (Last, First, Middle):

Trainee Diversity Report

This report format should NOT be used for data collection from trainees.

Training Grant Title: _____

Total Number of Appointed: _____

Grant Number: _____

PART A. TOTAL TRAINEE APPOINTMENTS REPORT: Number of Trainees Appointed by Ethnicity and Race

| Ethnic Category | Females | Males | Sex/Gender Unknown or Not Reported | Total |
|--|---------|-------|------------------------------------|-------|
| Hispanic or Latino | | | | ** |
| Not Hispanic or Latino | | | | |
| Unknown (individuals not reporting ethnicity) | | | | |
| Ethnic Category: Total of All Trainees* | | | | * |
| Racial Categories | | | | |
| American Indian/Alaska Native | | | | |
| Asian | | | | |
| Native Hawaiian or Other Pacific Islander | | | | |
| Black or African American | | | | |
| White | | | | |
| More Than One Race | | | | |
| Unknown or Not Reported | | | | |
| Racial Categories: Total of All Trainees* | | | | * |

PART B. HISPANIC TRAINEE APPOINTMENTS REPORT: Number of Hispanics or Latinos Appointed

| Racial Categories | Females | Males | Sex/Gender Unknown or Not Reported | Total |
|---|---------|-------|------------------------------------|-------|
| American Indian or Alaska Native | | | | |
| Asian | | | | |
| Native Hawaiian or Other Pacific Islander | | | | |
| Black or African American | | | | |
| White | | | | |
| More Than One Race | | | | |
| Unknown or Not Reported | | | | |
| Racial Categories: Total of Hispanics or Latinos** | | | | ** |

| PART C. TRAINEES WITH DISABILITIES OR FROM DISADVANTAGED BACKGROUNDS | |
|---|--|
| Number of Trainees with Disabilities (as described in the Americans with Disabilities Act): | |
| Number of Trainees from Disadvantaged Backgrounds (applies only to undergraduate and high school students): | |

(*) (**) These totals must agree.