

OMB Control No: 1230-0NEW

Expiration Date: XX/XX/2024

## WRP Student Registration Form

First Name (Required)

Middle Name

Last Name (Required)

Suffix

School that I Attend (Required)

- Dropdown field. Please see Excel "WRP Schools Table" for full list.

*Please list the postsecondary school that you currently attend. If you are a recent graduate, please list the postsecondary school from which you graduated*

Primary Phone (Required)

Alternate Phone

UserId/Primary Email (Required)

Confirm Email Address (Required)

Alternate Email

Time Zone (Required)

### **Privacy Act Statement Collection and Use of Personal Information**

The following statement is made in accordance with the Privacy Act of 1974 (5 U. S. C. 552a). Information collected will be handled and stored in compliance with the Freedom of Information Act and the Privacy Act of 1974, as amended (5 U.S.C. 552a). Furnishing the data requested is voluntary.

We will use the data you provide for the Workforce Recruitment Program. In accordance with the Confidential Information Protection and Statistical Efficiency Act of 2002 (Title 5 of Public Law 107-347) and other applicable Federal laws, your responses will not be disclosed in identifiable form without your informed consent. Per the Federal Cybersecurity Enhancement Act of 2015, Federal information systems are protected from malicious activities through cybersecurity screening of transmitted data.