

Information Collection Title: Workforce Recruitment Program (WRP)

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Public reporting burden for this application is estimated to average 1 hour per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting the application and interview. This collection of information is voluntary. You are not required to respond to this collection of information unless it displays a valid OMB control number. Please send comments regarding the burden estimate or any other aspect of this collection of information to the Office of Disability Employment Policy, U.S. Department of Labor, 200 Constitution Ave., NW, S-1313, Washington, DC, 20210 or to wrp@dol.gov and reference OMB control number 1230-0017. NOTE: Please do not send your completed application to this address.

Workforce Recruitment Program (WRP) Student Registration Form

First Name or Preferred Name (Required)

Middle Name

Last Name (Required)

Suffix

If you are currently known by any other legal or official names, please list them here (response not required)

Preferred Pronouns (response not required)

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.

- Have you graduated from or been affiliated with any other colleges or universities? (Required question if the school selected is not a WRP participating school, which is the case for about 15% of registrants. This question will not appear if the school selected participates in WRP, which is the case for about 85% of registrants.)
 - Yes

- If selected, a required text box field will appear **Please list those college(s) and describe your affiliation with them.**
- No

Drop down: **Please indicate which of the following matches your education status and eligibility for WRP. (Required)**

- I am a current, degree-seeking student at this college or university and I have a disability.
- I am a recent graduate of this college or university and I have a disability. I received my degree on or after April 1, [insert WRP year-3].
- Neither of the above criteria apply to me.
 - If this option is selected, a required text box will appear that reads: **You must be a degree-seeking college or graduate student OR a recent graduate with a degree to apply to the program. Individuals are considered recent graduates if they had their degree conferred on or after April 1, [insert WRP year -3]. You must also be a person with a disability. Please explain how you meet the WRP eligibility criteria listed above.**

Primary Phone (Required)

Alternate Phone

User ID/Primary Email (Required)

If you already have a Login.gov account, please list the email connected to your Login.gov account. If you do not, please use an email address that is professional and that you check frequently.

Confirm Email Address (Required)

Alternate Email

Time Zone (Required)

- Drop down with list of world time zones (with US time zones listed first)

Drop down: **How did you learn about the Workforce Recruitment Program? (Required)**

- College or university
- Federal employee
- Friend or family
- Colleague
- Email outreach from WRP
- Internet search
- Disability or community organization
 - If this option is selected, a required text box would appear that says **Please indicate which organization.**

- Other
 - If this option is selected, a required text box would appear that says **Please describe.**