



**APPLICANT SURVEY**

TO ALL APPLICANTS:

The information requested in the following questions will not affect you as an applicant. The information will be used to gather statistics to complete reports, track the status of the Affirmative Action Plan for West Milton State Bank and to determine how effective our recruitment efforts are. We would appreciate your assistance in our efforts to ensure equal employment opportunity.

**PROVIDING THIS INFORMATION IS STRICTLY VOLUNTARY.**

Title of Position for which applying: \_\_\_\_\_

City and State in which you reside: \_\_\_\_\_

Your age: \_\_\_\_\_ Your sex: \_\_\_\_\_

What Race/Ethnic group do you consider yourself:

Hispanic or Latino \_\_\_\_\_ White \_\_\_\_\_ Asian \_\_\_\_\_ Black or African American \_\_\_\_\_

Native Hawaiian or Other Pacific Islander \_\_\_\_\_ American Indian or Alaska Native \_\_\_\_\_

Two or More Races \_\_\_\_\_

Do you have a disability? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please identify: \_\_\_\_\_

If you wish to identify your veteran status, please complete: \_\_\_\_\_ Disable Veteran \_\_\_\_\_ Vietnam Era Veteran

Referral Source: \_\_\_\_\_ Ad (please specify: \_\_\_\_\_)

\_\_\_\_\_ West Milton State Bank Employee \_\_\_\_\_ Website \_\_\_\_\_ School

\_\_\_\_\_ Other source: \_\_\_\_\_

FAILURE TO PROVIDE THIS INFORMATION WILL NOT JEOPARDIZE OR ADVERSELY AFFECT YOUR CONSIDERATION FOR EMPLOYMENT. THIS INFORMATION WILL NOT BE USED IN THE SELECTION PROCESS FOR EMPLOYMENT. UPON RECEIPT BY WEST MILTON STATE BANK, THIS FORM WILL BE KEPT IN A CONFIDENTIAL FILE SEPARATE FROM YOUR APPLICATION.