



As a contractor for state and federal projects Alpha Milling is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, voluntary self-reporting or self-identification is the preferred method for collecting data on race, ethnicity and gender. Therefore we invite you to complete this self identification form, attach it to your resume/application and submit both to our Human Resources appointee.

Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcement. When reported, data will not identify any specific individual.

By completing this form, you are verifying that the information you are providing is accurate and that you understand that this information will be kept confidential; and that the sole use of this information is for inclusion in statistical reports required by various governmental regulations and agencies.

DATE OF APPLICATION: \_\_\_\_\_ POSITION APPLIED FOR \_\_\_\_\_

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ MIDDLE NAME: \_\_\_\_\_

SELECT ONE OF THE FOLLOWING: \_\_\_\_\_ FEMALE \_\_\_\_\_ MALE

SELECT ONE OF THE FOLLOWING:

Hispanic or Latino	White (not Hispanic or Latino)	Black or African American (not Hispanic or Latino)
_____	_____	_____

Native Hawaiian or Other Pacific Islander (not Hispanic or Latino)	Asian (not Hispanic or Latino)	American Indian or Alaska Native (not Hispanic or Latino)
_____	_____	_____

Two or More Races (not Hispanic or Latino)

\_\_\_\_\_

Veteran Status (check any that are applicable)

\_\_\_\_\_ Disabled Veteran      \_\_\_\_\_ Armed Forces Service Medal Veteran

\_\_\_\_\_ Other Protected Veteran      \_\_\_\_\_ Recently Separated Veteran

## Ethnicity/Race Classification Definitions

Race and ethnic designations as used by the Equal Employment Opportunity Commission do not denote scientific definitions of anthropological origins. Definitions of the race and ethnicity categories used by the EEOC are as follows.

### Ethnicity

**Hispanic or Latino** – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

### Race

**White (not Hispanic or Latino)** – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

**Black or African American (not Hispanic or Latino)** – A person having origins in any of the black racial groups of Africa.

**Native Hawaiian or Other Pacific Islander (not Hispanic or Latino)** – A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands

**Asian (not Hispanic or Latino)** – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

**American Indian or Alaska Native (not Hispanic or Latino)** – A person having origins in any of the original peoples of North and South American (including Central America), and who maintain tribal affiliation or community attachment.

**Two or More Races (not Hispanic of Latino)** – All persons who identify with more than one of the above five races.

## Veteran Status Definitions

**Disabled Veteran** – (1) A veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans Affairs, or (2) A person who was discharged or released from active duty because of a service-connected disability.

**Recently separated veteran** – any veteran during the three-year period beginning on the date of such veteran's discharge or release from active duty in the U.S. military, ground, naval or air service.

**Armed Forces service medal veteran** – any veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive order 12985.

**Other protected veteran**—a veteran who served on active duty in the U.S. military, ground, naval or air service during a war or in a campaign or expedition for which a campaign badge has been authorized, under the laws administered by the Department of Defense.



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PH: 303-428-2899 FX: 303-428-2347  
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## Employment Application

Today's Date: \_\_\_\_\_

Employment Desired:  Full-time  Part-time

Position Desired: \_\_\_\_\_

### Personal Information

Name:	Social Security Number:
Street Address:	Home Phone: (    ) -
City/State/Zip:	Are you 18 years of age or older? Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you have a valid driver's license? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Driver's License Number: _____ Class of License: _____ State of Issue: _____	
Have you had your driver's license revoked or suspended in the last 3 years? Yes <input type="checkbox"/> No <input type="checkbox"/>	
If yes, give details: _____	
Have you ever been convicted of any major law violation (except traffic violation?) Yes <input type="checkbox"/> No <input type="checkbox"/>	
If yes, give details: _____	

### Education

Highest level of education completed: _____
Schools Attended: _____
Subjects Studied: _____
List any other relevant Certifications/Credentials: _____
What skills or training do you have that is relevant to the position for which you are applying? _____ _____
List any machines or equipment you have operated or have experience with: _____ _____



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**Previous Work History** (List most recent first)

Company Name:	Dates Employed: From:                      To:
Job Title / Duties:	Last Pay Rate:
Reason for Leaving:	Supervisor:
Company Address:	Telephone: (    ) -

Company Name:	Dates Employed: From:                      To:
Job Title / Duties:	Last Pay Rate:
Reason for Leaving:	Supervisor:
Company Address:	Telephone: (    ) -

Company Name:	Dates Employed: From:                      To:
Job Title / Duties:	Last Pay Rate:
Reason for Leaving:	Supervisor:
Company Address:	Telephone: (    ) -

**References**

List 3 school or business references that you give us permission to contact.

Name/Title	Relationship to you	Phone
		(    ) -
		(    ) -
		(    ) -