

Civil Rights Voluntary Demographic Information

SDSU Extension asks that you voluntarily respond to the questions on this form. The information is requested only to make sure we are presenting our programs to a wide range of participants.				
Name of program you are attending:				
Name of the county you are i	n while atten	ding the program	າ:	
- /	□ Yes □ Yes	□ No □ No		
Race:				
Please check one or more boxes box below:				
☐ White ☐ American Indian or Alaska Native☐ Native Hawaiian/Other Pacific Islander			☐ Asian	☐ Black or African American
Some other race Please print other race _				
Gender:	☐ Male	☐ Female		
Age: □ Under 18	1 8-	64 🖵 65+	-	
Veteran Status: Are you a veteran?	□ Yes	□ No		
Americans with Disabilities Do you consider yourself		☐ Yes	□No	

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