



## Voluntary Candidate Identification

At Better Health Together (BHT) we see how bringing together diverse perspectives strengthens our teams and community. We also know that without intentionality, hiring practices tend to favor a dominant culture at the cost of historically marginalized populations. In our commitment to disrupting this pattern, our hiring and onboarding process is centered around supporting and celebrating Diversity, Equity, and Belonging in all we do as an equal opportunity employer.

BHT has set our definition of diversity to include race/ethnicity, disability, sexual orientation, gender, and veteran status. We invite you to **VOLUNTARILY** identify yourself in the categories below at the time of application and if applicable, upon hire. If you decline, it will not subject you to adverse treatment.

The information is only reviewed by BHT's third-party HR firm and used to measure BHT's efficacy to attract diverse pools of qualified applicants and ensure equal employment opportunity. This is **NOT** part of your application file and will not be seen by the hiring manager for this position. Hiring is always based on individual job qualifications. BHT adheres to Title II of the Civil Rights Act of 1964 and the Americans with Disabilities Act, which prohibits discrimination of any kind based on race, color, religion, gender, sexual orientation, national origin, age, disability, or pregnancy.

1. **Gender**      \_\_\_ Male      \_\_\_ Female      \_\_\_ Genderqueer/Non-binary
2. **Pronouns** (e.g. she/her/hers, he/him/his, they/them/their, zie/zir) \_\_\_\_\_
3. **Ethnic and Racial Background.** Check all that apply.

<input type="checkbox"/> Asian, Asian American	<i>Ethnicity:</i>
<input type="checkbox"/> Black / African American / African	<i>Ethnicity:</i>
<input type="checkbox"/> Latinx (formally Hispanic)	<i>Ethnicity:</i>
<input type="checkbox"/> Middle Eastern	<i>Ethnicity:</i>
<input type="checkbox"/> Native American/Indigenous /Alaska Native/First Nations	<i>Enrolled or Principal Tribe:</i>
<input type="checkbox"/> Native Hawaiian / Pacific Islander	<i>Ethnicity</i>
<input type="checkbox"/> White	<i>Ethnicity</i>
<input type="checkbox"/> Two or More Races / Ethnicities	<i>Ethnicity</i>
<input type="checkbox"/> I choose <b>NOT</b> to self-identify.	

4. **Sexual Orientation** (e.g. lesbian, gay, bisexual, pansexual, hetero, etc.) \_\_\_\_\_  
 I choose **NOT** to self-identify.

5. **Veteran Status.** If you belong to any of the categories of protected veterans listed below, please indicate by checking the appropriate box (or boxes).

I belong to the following classifications of protected veterans (choose all that apply):

- Veteran with disabilities
- Recently-separated veteran
- Active-wartime or campaign-badge veteran
- I am a protected veteran, but choose not to self-identify the classification to which I belong
- I am **NOT** a protected veteran

6. **Disability.** As defined by the Americans with Disabilities Act (ADA), an individual with a disability is “a person who has a physical or mental impairment that substantially limits one or more major life activities, a person who has a history or record of such impairment, or a person who is perceived by others as having such an impairment”.

*Please note that while the following conditions could easily be considered a disability within the meaning of the law, it is not an exhaustive list of all disabilities:*

- Autism
- Bipolar Disorder
- Blindness
- Cancer
- Cerebral Palsy
- Deafness
- Diabetes
- Epilepsy
- HIV Infection/AIDS
- Intellectual Disabilities
- Major Depressive Disorder
- Multiple Sclerosis
- Muscular Dystrophy
- Obsessive-Compulsive Disorder
- Partial or Completely Missing Limbs
- Post-Traumatic Stress Disorder
- Required Use of Wheelchair
- Schizophrenia

- I have a disability
- I **DO NOT** have a disability

Please contact Human Resources if you require a reasonable accommodation to apply for a job or to perform your job. Examples of reasonable accommodation include making a change to the application process or work procedure, providing documents in an alternate format, using a sign language interpreter, or using specialized equipment.

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Print Name

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Signature

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Date