

APPLICATION FOR EMPLOYMENT

PLEASE ANSWER ALL QUESTIONS AND PRINT LEGIBLY. Please complete each section fully and accurately. Please PRINT, except for the signature at the end of this application. To the extent that some of the information requested is on your resume, you may write "see resume" where appropriate and attach a copy. The statements on your resume will be considered to be part of your response to this application. In any event, you must read and sign the Affidavit section of this application.

Please indicate if you need additional space to complete an answer to any questions listed below. Also let us know if you need assistance in completing this application or need an application in an alternative format.

GENERAL INFORMATION AND POSITION DESIRED

Name: _____ (First) _____ (Middle) _____ (Last)

Street Address _____ Telephone Number _____

City _____ State _____ Zip Code _____

Email and/or website _____

Position(s) applied for _____

Type of work desired:

_____ Full-Time _____ Part-Time _____ Temporary _____ Partial-Year (e.g., 9 months, 10 months) _____ Summer

Salary requirement _____ Date available for work _____

How were you referred to us? _____

Are you legally permitted to work in the United States? _____ Yes _____ No

Are you able to provide documentation demonstrating your legal ability to work in the United States?

_____ Yes _____ No

Have you been employed by the Bank previously? _____ Yes _____ No

Have you applied for a position at the Bank before? _____ Yes _____ No

Do you currently have a relative employed by the Bank? _____ Yes _____ No

Use the space below to describe your interest in banking and the skills and aptitudes that you feel qualify you for a position at the Bank. If you need more space, please continue on a separate sheet.

CRIMINAL RECORD

An applicant for employment with a sealed record on file with the Commissioner of Probation may answer "no record" with respect to any inquiry relative to prior arrests, criminal court appearances or convictions.

An applicant for employment may answer "no record" with respect to any inquiry relative to prior arrests, court appearances and adjudications in all cases of delinquency or as a child in need of services provided it did not result in a complaint transferred to the Superior Court for criminal prosecution.

A conviction record is not an automatic bar to employment. Factors such as age at time of the offense, time that has passed since the offense or completion of any sentence, seriousness and nature of the offense, rehabilitation and the nature of the job sought will be taken into account.

Have you ever been convicted of a felony? _____ Yes _____ No

If yes, please identify any and all felonies and explain: _____

Have you been convicted of a misdemeanor within the past five years or finished a period of incarceration for a misdemeanor within the past five years? _____ Yes _____ No

You need not answer "Yes" with respect to a first conviction for drunkenness, simple assault, speeding, minor traffic violations, affray, or disturbance of the peace.

If yes, please identify any and all misdemeanors (except those excluded above) and explain: _____

EDUCATION

City/State	Major Course/Subject	Circle Last	Year Completed	Degree
High School/Prep			1 2 3 4	
Business School			1 2 3 4	
College			1 2 3 4	
Graduate Work			1 2 3 4	

List scholastic honors, offices held and activities in high school and college: _____

If you did not graduate, why did you leave school or college: _____

Are you planning to pursue further studies? _____ Yes _____ No

If yes, where and what courses? _____

EMPLOYMENT RECORD

Please list the most recent information first. Account for all periods of time and all positions held over the last ten years, including military service. You may include volunteer positions if you wish. Please indicate if additional space is needed.

EMPLOYER	Dates Employed: From	To	
Street	Starting Salary:	Leaving Salary:	
City/State	Zip Code	Reference:	Phone:
Position and Duties _____			
Reason for Leaving _____			

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Street	Starting Salary:	Leaving Salary:	
City/State	Zip Code	Reference:	Phone:
Position and Duties _____			
Reason for Leaving _____			

EMPLOYER	Dates Employed: From	To	
Street	Starting Salary:	Leaving Salary:	
City/State	Zip Code	Reference:	Phone:
Position and Duties _____			
Reason for Leaving _____			

Have you ever been involuntarily terminated from employment in any job, including but not limited to any of the positions identified in this application or your resume?

_____ Yes _____ No If yes, please explain any and all such circumstances _____

If presently employed, why do you desire to change your position? _____

If you are now employed, may we contact your present employer? _____ Yes _____ No

DISCLOSURES

The Bank is an equal employment opportunity employer and does not discriminate in hiring or employment on the basis of race, color, religious creed, national origin, sex, gender identity, sexual orientation, genetic information, ancestry, age, disability, military or veteran status or any other category protected by federal or state law. No question on this application is intended to secure information to be used for such discrimination.

It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

This application will be given consideration, but its receipt does not imply that you will be employed. The Bank, at its own expense, arranges for a bond for each of its employees. If your (the applicant's) background is unacceptable to a bonding company (under standards that do not discriminate on an illegal basis), it will be difficult to secure this bond, and the Bank may not offer employment to you.

PLEASE READ CAREFULLY BEFORE SIGNING. If you have any questions regarding this statement, please ask them of an employment interviewer before signing

AFFIDAVIT

I authorize the Bank to make inquiries regarding my work and educational history from any of my past employers and from educational institutions that I have attended. I release the Bank, as well as my past employers and educational institutions, from any and all liability or damage for requesting and/or issuing this information.

I acknowledge receipt of a separate statement that the Bank may obtain a consumer report on me for purposes of this employment application and, should I become employed by the Bank, at any time during my employment with the Bank.

I understand that if I am hired, I must provide proof of eligibility to work in the United States. If I do not provide such proof within three (3) days of my hire, I understand that the Bank may terminate my employment.

I understand that, if I am hired, my employment with the Bank will be at will and may be terminated by the Bank or me at any time and for any reason. I understand that no documents or statements of the Bank will constitute a contract of employment that in any way limits the Bank's right to terminate employment at will. I further understand that the at-will nature of my employment cannot be changed except by a formal written contract signed by both the President of the Bank and me.

Without limiting in any way the at-will status of my employment if I am hired, I understand that if any of the information I have provided on this application or any accompanying resume is untrue, the Bank will immediately discharge me.

I hereby acknowledge that I have read the above statement and understand the same.

Signature of Applicant

Date

Printed Name

FOR BANK USE ONLY
(To be filled out after applicant is hired)

Date Employed _____ Date of Birth _____

Social Security # _____

Department _____

Job Title _____

Salaried _____ Hourly _____

Work Schedule (Hours, days, etc.) _____

Job No. _____ Previously used name, if any _____

In case of an accident or other emergency, who is the first person we should contact?

Name _____ Relationship _____

Telephone _____ Address _____

Complete the following portion if the applicant is refused employment based in whole or in part on a consumer report or an investigative consumer report.

If an applicant is rejected in whole or in part based on a consumer report or an investigative consumer report, the following steps must be taken. Initial and date the completion of each step.

Before the action is taken:

1. Provide the applicant a copy of the report and an opportunity to respond. Initials: _____ Date: _____
2. Provide the applicant a copy of the Federal Trade Commission summary of his or her rights. Initials: _____ Date: _____

Once the action is taken:

1. Provide notice to the applicant. Initials: _____ Date: _____
2. Provide the name, address and telephone number of the consumer reporting agency to the applicant.
Initials: _____ Date: _____
3. Provide a statement to the applicant that the consumer reporting agency did not make the decision and is unable to provide specific reasons why the action was taken. Initials: _____ Date: _____
4. Notify the applicant of his or her right to obtain a free copy of the report from the consumer reporting agency within 60 days of the notice. Initials: _____ Date: _____

Review the following and initial and date one of the alternatives:

If the report is an investigative consumer report, the applicant may make a written request for disclosure of the nature and scope of the investigation requested. In the event of such a request, such a disclosure must be made within five days of the receipt of the request.

- No investigative consumer report was obtained by the Bank. Initials: _____ Date: _____
- An investigative consumer report was obtained by the Bank but the applicant has not requested a statement concerning the nature and scope of the report. Initials: _____ Date: _____
- The applicant requested such a statement and it was provided within the five-day period. Initials: _____ Date: _____

FAIR CREDIT REPORTING ACT DISCLOSURE & AUTHORIZATION

As an applicant for employment or a current employee of the Bank, you are a consumer with rights under the Fair Credit Reporting Act. When any of the following circumstances exist, the Bank may choose to obtain and use information contained in either a consumer report or an investigative consumer report from a consumer reporting agency about you when: (1) considering your application for employment, (2) making a decision whether to offer you employment, (3) deciding whether to continue your employment (if you are hired), or (4) making other employment-related decisions directly affecting you.

For your information, a "consumer reporting agency" is a person or business which, for monetary fees, dues, or on a cooperative non-profit basis, regularly assembles or evaluates consumer credit information or other information on consumers for the purpose of furnishing consumer reports to others, such as the Bank.

A "consumer report" means any written, oral, or other communication of any information by a consumer reporting agency bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living, which is used or expected to be used or collected in whole or in part for the purpose of serving as a factor in establishing your eligibility for employment purposes.

An "investigative consumer report" means a consumer report or portion thereof in which information on your character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with your neighbors, friends, or associates reported on or with others with whom you are acquainted or who may have knowledge concerning any such items of information.

In the event an investigative consumer report is prepared, you may request additional disclosures regarding the nature and scope of the investigation requested, as well as a written summary of your rights under the Fair Credit Reporting Act.

AUTHORIZATION

By signing below, I, _____, hereby voluntarily authorize the Bank to obtain either a consumer report or an investigative consumer report about me from a consumer reporting agency and to consider this information when making decisions regarding my employment at the Bank. I understand that I have rights under the Fair Credit Reporting Act, including the rights discussed above.

SIGNATURE

DATE

CRIMINAL OFFENDER RECORD INFORMATION (CORI)
ACKNOWLEDGEMENT FORM

TO BE USED BY ORGANIZATIONS USING CONSUMER REPORTING AGENCIES TO CONDUCT CORI CHECKS FOR EMPLOYMENT, VOLUNTEER, SUBCONTRACTOR, LICENSING, AND HOUSING PURPOSES **Dedham Institution for Savings** is registered under the provisions of M.G.L. c. 6, § 172 to receive CORI for the purpose of screening current and otherwise qualified prospective employees, subcontractors, volunteers, license applicants, current licensees, and applicants for the rental or lease of housing. **Dedham Institution for Savings** has authorized **Creative Services, Inc.** to submit CORI checks to the Massachusetts Department of Criminal Justice Information Services (DCJIS) on its behalf.

As a prospective or current employee, subcontractor, volunteer, license applicant, current licensee, or applicant for the rental or lease of housing, I understand that a CORI check will be submitted for my personal information to the DCJIS. I hereby acknowledge and provide permission to **Creative Services, Inc.** to submit a CORI check for my information to the DCJIS. This authorization is valid for one year from the date of my signature. I may withdraw this authorization at any time by providing **Dedham Institution for Savings & Creative Services, Inc.** with written notice of my intent to withdraw consent to a CORI check. I also understand that this form is a CORI acknowledgement form and I am entitled to additional consumer reporting disclosure forms under the Fair Credit Reporting Act. If I have not received those disclosures, I should contact **Creative Services, Inc.** to request this information.

FOR EMPLOYMENT, VOLUNTEER, AND LICENSING PURPOSES ONLY: **Creative Services, Inc.** on behalf **Dedham Institution for Savings** may conduct subsequent CORI checks within one year of the date this Form was signed by me provided, however, that **Dedham Institution for Savings & Creative Services, Inc.** must first provide me with written notice of this check.

By signing below, I provide my consent to a CORI check and acknowledge that the information provided on Page 2 of this Acknowledgement Form is true and accurate.

SIGNATURE

DATE

SUBJECT INFORMATION:

Last Name First Name Middle Name Suffix

Maiden Name (or other name(s) by which you have been known)

Date of Birth Place of Birth

Last Six Digits of Your Social Security Number _____-_____

Sex: ____ Height: ____ ft. ____ in. Eye Color: _____ Race: _____

Driver's License or ID Number: _____ State of Issue: _____

Mother's Full Maiden Name Father's Full Name

Current and Former Addresses:

Street Number & Name City/Town State Zip

Street Number & Name City/Town State Zip

The above information was verified by reviewing the following form(s) of government issued identification:

VERIFIED BY: _____
Name of Verifying Employee (Please Print)

Signature of Verifying Employee



NOTICE & CONSENT FOR THE PROCUREMENT OF A CONSUMER AND/OR INVESTIGATIVE REPORT FOR EMPLOYMENT PURPOSES

In connection with my application for employment, I, the undersigned consumer, do hereby authorize **Dedham Institution for Savings** to procure a consumer report and/or investigative consumer report on me. I understand that **Dedham Institution for Savings** may utilize a consumer-reporting agency to perform this service.

I understand that the above-mentioned reports may include, but are not limited to, information concerning my employment history, education, character, general reputation, credit history, judgments, liens, driving history, social security number, criminal/civil history and any other public records.

I understand such information may be obtained by direct or indirect contact with former employers, schools, financial institutions, landlords, public agencies as well as through personal interviews with my references, associates, or other persons who may have such knowledge.

I understand that upon written request, I will be informed whether or not an investigative report was requested, and if a report was requested, I will be informed of the name and address of the consumer reporting agency that furnished the report.

I understand that this consumer report or investigative consumer report will be utilized by **Dedham Institution for Savings** for the purposes of evaluating me for employment, retention, promotion or reassignment. I also understand that if I am denied employment or adverse employment action is taken against me based wholly or in part on information obtained from this consumer report, that I will be notified by **Dedham Institution for Savings**. In such event, **Dedham Institution for Savings** will provide me with a copy of the consumer report along with a description of my rights under the Fair Credit Reporting Act and applicable state and federal laws.

I hereby release **Dedham Institution for Savings**, its agents, and any and all persons, business entities and governmental agencies, whether public or private, from any and all liability, claims and/or demands, by me, my heirs or others making such a claim or demand on my behalf, for providing a consumer report and/or investigative consumer report hereby authorized. I understand that this Notice & Consent form shall remain in effect for the duration of my employment with **Dedham Institution for Savings** and shall serve as ongoing authorization to procure a consumer report at any time during the course of my employment.

Signature: _____ Date: _____
Printed Name: _____ Social Security #: _____



Release & Authorization

In connection with my application for employment with **Dedham Institution for Savings** (and if I become employed here, at any time during my employment), I hereby authorize **Creative Services, Inc. of 64 Pratt Street, Mansfield, MA 02048-1927** and its agents to conduct a full investigation into my background and activities. Therefore, you are hereby authorized to release any and all information pertaining to me, documentary or otherwise, as requested by any appropriate employee, agent or representative of Creative Services, Inc. I understand that, during this background investigation process and in accordance with the Fair Credit Reporting Act, a Consumer Report or Investigative Consumer Report may be obtained concerning my previous employment, credit record, education, criminal history, driving history, character, general reputation, personal characteristics and mode of living. I release all Courts, Probation Departments, Selective Service Boards, Employers, Education Institutions, Banks, Credit Bureaus, Financial and other institutions, Law Enforcement and Governmental Agencies, federal, state and local, without exception, both foreign and domestic, from all liability and responsibility. I understand that this information may be transmitted electronically and authorize such transmissions. *I authorize that a photocopy of this release be accepted with the same authority as the original and that it may be used at any point during my employment.*

If you are applying for employment in the state of California, Minnesota or Oklahoma, would you like a copy of the consumer report prepared on you?	___ YES	___ NO
If currently employed, may we contact your current employer?	___ YES	___ NO ___ N/A

(LAST NAME) _____ (FIRST NAME) _____ (MIDDLE NAME) _____

List any other **LAST NAMES** that you have utilized during the previous 7 years or used when you received your GED, high school diploma or other degrees

Current Address: _____

City & State: _____ **Zip Code:** _____

Please list all addresses from the past seven years:

(Street) (City) (State) (Zip Code)

(Street) (City) (State) (Zip Code)

(Street) (City) (State) (Zip Code)

Social Security No: _____

Driver's License No: _____ **Driver's License State of Issue:** _____

Signature: _____ **Date:** _____



**Disclosure Notice to Applicants
as required by the
Fair Credit Reporting Act**

In connection with your employment application, a consumer report and/or an investigative consumer report, including information with respect to your character, general reputation, and personal characteristics, whichever are applicable, may be made.

You have the right, within a reasonable period of time after receipt of this notice, to make a written request for the nature and scope of the investigation requested by us and a written summary of your rights under the Fair Credit Reporting Act.

Such requests should be mailed to:

Dedham Institution for Savings
55 Elm Street
Dedham, MA 02026

Attention: Jean Tennihan

Para informacion en espanol, visite www.ftc.gov/credit o escribe a la FTC Consumer Response Center, Room 130-A 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.ftc.gov/credit or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identify theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.ftc.gov/credit for additional information.
- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.ftc.gov/credit for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.ftc.gov/credit.
- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.ftc.gov/credit.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:

TYPE OF BUSINESS:	CONTACT:
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission: Consumer Response Center - FCRA Washington, DC 20580 1-877-382-4357
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Avenue, Suite 100 Kansas City, Missouri 64108-2638 1-877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation, Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator - GIPSA Washington, DC 20250 202-720-7051

**PRE-OFFER
VOLUNTARY SELF IDENTIFICATION FORM**

As a Government Contractor, subject to Executive Order 11246, Section 503 of the Rehabilitation Act of 1973 and the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended, DEDHAM INSTITUTION FOR SAVINGS ("the Bank") takes affirmative action to actively recruit, employ and advance in employment qualified minorities, females, qualified disabled individuals, Armed Forces service medal veterans, recently separated veterans, qualified disabled veterans and other protected veterans.

The information on this form helps us comply with Federal and State Equal Employment Opportunity requirements and our Affirmative Action Program. Note that the completion of this form is voluntary on your part. Completed forms will be maintained in a file separate from employment applications and will not be used to discriminate against or show preference for any applicant. Dedham Institution for Savings will keep such information confidential, except that government officials investigating the Bank for affirmative action compliance may be informed.

If you choose to provide us with this information, you may do so at this time or at any time in the future.

Name: _____ Soc. Sec. # _____

Sex: Male Female

Please specify your Race/Ethnic classification by first indicating whether you consider yourself to be Hispanic or Latino:

Hispanic or Latino Yes No

If you are not Hispanic or Latino, please check one or more of the following racial categories:

- American Indian/Alaskan Native (Not Hispanic or Latino)
- Black or African American (Not Hispanic or Latino)
- White (Not Hispanic or Latino)
- Asian (Not Hispanic or Latino)
- Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)
- Two or more races (Not Hispanic or Latino)

For information regarding the definitions of the foregoing racial/ethnicity categories, please see the attached sheet or contact the Bank's Human Resources Department.

Are you an Armed Forces service medal veteran? Yes No

Are you an "other protected veteran?" Yes No

Are you a recently separated veteran? Yes No

If you wish to review Dedham Institution for Savings' Affirmative Action Plan for disabled individuals, disabled veterans, recently separated veterans, Armed Forces Service Medal veterans, and other protected veterans, you may make arrangements with Jean Tennihan at (781) 320-1464.

For information regarding definitions of any of the terms above, see the attached sheet or contact the Bank's Human Resources Department.

RACE/ETHNIC IDENTIFICATION

Race/Ethnic designations as used by the Equal Employment Opportunity Commission do not denote scientific definitions of anthropological origins. For the purposes of record-keeping, an employee may be included in the group to which she/he appears to belong, identifies with, or is regarded in the community as belonging.

The following **race/ethnic groups** are recognized by the EEOC for reporting purposes:

HISPANIC OR LATINO	All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
ASIAN	(Not Hispanic or Latino) -- All persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent. This area includes for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam
WHITE	(Not Hispanic or Latino) -- All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.
BLACK OR AFRICAN AMERICAN	(Not Hispanic or Latino) -- All persons having origins in any of the Black racial groups of Africa.
NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER	(Not Hispanic or Latino) -- All persons having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
AMERICAN INDIAN OR ALASKAN NATIVE	(Not Hispanic or Latino) -- All persons having origins in any of the original peoples of North and South America (including Central America) and who maintain cultural identification through tribal affiliation or community recognition.
TWO OR MORE RACES	(Not Hispanic or Latino) -- All persons who identify with more than one of the above five races
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. If you have a question about whether you meet this definition, please see human resources.
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.
OTHER PROTECTED VETERAN	A person who served on active duty in the U.S. military, ground, naval or air services during a war or in a campaign or expedition for which a campaign badge has been authorized. If you have a question about whether you meet this definition, please see human resources.
DISABLED VETERAN	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 a person who was discharged or released from active duty because of a service-connected disability.
DISABLED	A disabled individual is defined as any person who has a physical or mental impairment which substantially limits one or more of such person's major life activities, or has a record of such impairment, or is regarded as having an impairment. ("Life activities" are those which affect employability, "substantially limits" means the degree that the impairment affects employability.)