

The information regarding race, ethnicity, and sex designation solicited on this application is requested in order to assure the Federal Government, acting through USDA Rural Development that the Federal Laws prohibiting discrimination against customer applications on the basis of race, color, national origin, religion, sex, familial status, age, and disability are complied with. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, the lender is required to note the race/national origin and sex of individual applicants on the basis of visual observation or surname.

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| RECEIPT <input type="checkbox"/> I do not wish to furnish this information                                                                                                                                                                                | CO-RECEIPT <input type="checkbox"/> I do not wish to furnish this information                                                                                                                                                                             |
| Race: <input type="checkbox"/> American Indian or Alaska Native<br><input type="checkbox"/> Asian<br><input type="checkbox"/> Black or African American<br><input type="checkbox"/> Native Hawaiian or Pacific Islander<br><input type="checkbox"/> White | Race: <input type="checkbox"/> American Indian or Alaska Native<br><input type="checkbox"/> Asian<br><input type="checkbox"/> Black or African American<br><input type="checkbox"/> Native Hawaiian or Pacific Islander<br><input type="checkbox"/> White |
| Ethnicity: <input type="checkbox"/> Hispanic or Latino<br><input type="checkbox"/> Non-Hispanic Latino                                                                                                                                                    | Ethnicity: <input type="checkbox"/> Hispanic or Latino<br><input type="checkbox"/> Non-Hispanic Latino                                                                                                                                                    |
| Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male                                                                                                                                                                                        | Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male                                                                                                                                                                                        |
| Interviewer's Name (print or type)                                                                                                                                                                                                                        | Name and Address of Interviewer's Employer                                                                                                                                                                                                                |
| Interviewer's Signature _____ Date _____                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                           |
| Interviewer's Phone Number _____                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                           |