

## ETHNICITY AND RACIAL DATA

(Please Complete One form for every household member)

<b>Name: (Last, First and MI)</b>		
<b>Relationship to Head of Household</b>	Head of Household Co-Head of Household Other Adult Non Member	Spouse Dependent Foster/Child/Adult
<b>Social Security Number or TRACS ID</b>		
<b>Ethnicity (Please Select One)</b>	Hispanic or Latino	Non-Hispanic or Latino
<b>Race (Please Select One)</b>	American Indian or Alaska Native Black or African American White	Asian Native Hawaiian or other Pacific Islander

Signature

\_\_\_\_\_

Date Signed

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Please check this box if you are completing this form for a minor (under 18)

**HEAD AND CO-HEAD MANDATORY**