

## EEO-1 VOLUNTARY SELF-IDENTIFICATION SURVEY FOR APPLICANTS

In compliance with federal and state equal employment laws, all qualified applicants will be considered for employment without regard to race, color, national origin, religion, sex, age, disability, veteran status or any other prohibited basis under applicable federal, state or local law. Submission of this information is voluntary and neither disclosure of the information nor refusal to provide it will affect consideration of your application. The information you provide will be kept confidential, separate from your application, and will be used only in accordance with the provisions of applicable laws, executive orders and regulations.

PRINT NAME: <i>(Last)</i>	<i>(First)</i>	<i>(Middle)</i>	Date

Position Applied for: \_\_\_\_\_

Please check the appropriate box or boxes below. Feel free to skip any questions that you do not wish to answer:

**What is your RACE / ETHNICITY** (If more than one category is applicable, check the one with which you most closely identify):

**HISPANIC OR LATINO**

A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race

**WHITE (NOT HISPANIC OR LATINO)**

A person having origins in any of the original peoples of Europe, the Middle East, or North Africa

**AMERICAN INDIAN OR ALASKAN NATIVE (NOT HISPANIC OR LATINO)**

A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment

**BLACK OR AFRICAN AMERICAN (NOT HISPANIC OR LATINO)**

A person having origins in any of the black racial groups of Africa

**NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER (NOT HISPANIC OR LATINO)**

A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands

**ASIAN (NOT HISPANIC OR LATINO)**

A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam

**TWO OR MORE RACES (NOT HISPANIC OR LATINO)**

All persons who identify with more than one of the above five races

**I do not wish to self-identify**

**What is your GENDER:**  Male  Female

**VIETNAM ERA VETERANS' READJUSTMENT ASSISTANCE ACT OF 1974**  
**VOLUNTARY APPLICANT SELF-IDENTIFICATION SURVEY**

First Bank & Trust Co. (the "Company") is a government contractor subject to the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended ("VEVRAA"), which requires government contractors to take affirmative action to employ and advance in employment qualified disabled veterans, recently separated veterans, active duty wartime or campaign badge veterans, and Armed Forces service medal veterans. These classifications are defined as follows:

- A "disabled veteran" is one of the following: (a) 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 (b) a person who was discharged or released from active duty because of a service-connected disability.
- A "recently separated veteran" means 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.
- An "active duty wartime or campaign badge veteran" means a veteran who served on active duty in the U.S. military, ground, naval, or air service during a war, or in a campaign or expedition for which a campaign badge has been authorized under the laws administered by the Department of Defense.
- An "Armed forces service medal veteran" means a 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.

Protected veterans may have additional rights under the Uniformed Services Employment and Reemployment Rights Act ("USERRA"). In particular, if you were absent from employment in order to perform service in the uniformed service, you may be entitled to be reemployed by your employer in the position you would have obtained with reasonable certainty if not for the absence due to service. For more information, call the U.S. Department of Labor's Veterans Employment and Training Service (VETS), toll-free, at 1-866-4-USA-DOL.

If you believe you belong to any of the categories of protected veterans listed above, please indicate by checking the appropriate box below. As a Government contractor subject to VEVRAA, the Company requests this information in order to measure the effectiveness of the outreach and positive recruitment efforts the Company undertakes pursuant to VEVRAA.

**I IDENTIFY AS ONE OR MORE OF THE CLASSIFICATIONS OF PROTECTED VETERANS LISTED ABOVE**

**I AM NOT A PROTECTED VETERAN**

Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information provided will be used only in ways that are not inconsistent with the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended.

The information you submit will be kept confidential, except that (i) supervisors and managers may be informed regarding restrictions on the work or duties of disabled veterans, and regarding necessary accommodations; (ii) first aid and safety personnel may be informed, when and to the extent appropriate, if you have a condition that might require emergency treatment; and (iii) Government officials engaged in enforcing laws administered by the Office of Federal Contract Compliance Programs, or enforcing the Americans with Disabilities Act, may be informed. If you hold one of these statuses, the Company would like to know for purposes of our Affirmative Action Plan (the "Plan"). This information will be recorded and utilized in a manner consistent with the statutes and regulations governing the Plan.

<b>PRINT NAME: (Last)</b>	<b>(First)</b>	<b>(Middle)</b>	<b>Date</b>

**Position:** \_\_\_\_\_

## Voluntary Self-Identification of Disability

Form CC-305  
OMB Control Number 1250-0005  
Expires 1/31/2020  
Page 1 of 2

### Why are you being asked to complete this form?

Because we do business with the government, we must reach out to, hire, and provide equal opportunity to qualified people with disabilities.<sup>1</sup> To help us measure how well we are doing, we are asking you to tell us if you have a disability or if you ever had a disability. Completing this form is voluntary, but we hope that you will choose to fill it out. If you are applying for a job, any answer you give will be kept private and will not be used against you in any way.

If you already work for us, your answer will not be used against you in any way. Because a person may become disabled at any time, we are required to ask all of our employees to update their information every five years. You may voluntarily self-identify as having a disability on this form without fear of any punishment because you did not identify as having a disability earlier.

### How do I know if I have a disability?

You are considered to have a disability if you have a physical or mental impairment or medical condition that substantially limits a major life activity, or if you have a history or record of such an impairment or medical condition.

Disabilities include, but are not limited to:

- Blindness
- Autism
- Bipolar disorder
- Post-traumatic stress disorder (PTSD)
- Deafness
- Cerebral palsy
- Major depression
- Obsessive compulsive disorder
- Cancer
- HIV/AIDS
- Multiple sclerosis (MS)
- Impairments requiring the use of a wheelchair
- Diabetes
- Schizophrenia
- Missing limbs or partially missing limbs
- Intellectual disability (previously called mental retardation)
- Epilepsy
- Muscular dystrophy

Please check one of the boxes below:

- YES, I HAVE A DISABILITY (or previously had a disability)
- NO, I DON'T HAVE A DISABILITY
- I DON'T WISH TO ANSWER

\_\_\_\_\_  
Your Name

\_\_\_\_\_  
Today's Date

## Voluntary Self-Identification of Disability

Form CC-305  
OMB Control Number 1250-0005  
Expires 1/31/2020  
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### Reasonable Accommodation Notice

Federal law requires employers to provide reasonable accommodation to qualified individuals with disabilities. Please tell us 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 procedures, providing documents in an alternate format, using a sign language interpreter, or using specialized equipment.

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<sup>i</sup> Section 503 of the Rehabilitation Act of 1973, as amended. For more information about this form or the equal employment obligations of Federal contractors, visit the U.S. Department of Labor's Office of Federal Contract Compliance Programs (OFCCP) website at [www.dol.gov/ofccp](http://www.dol.gov/ofccp).

**PUBLIC BURDEN STATEMENT:** According to the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. This survey should take about 5 minutes to complete.

**VIETNAM ERA VETERANS' READJUSTMENT ASSISTANCE ACT OF 1974  
VOLUNTARY EMPLOYEE SELF-IDENTIFICATION SURVEY**

First Bank & Trust Co. (the "Company") is a government contractor subject to the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended ("VEVRAA"), which requires government contractors to take affirmative action to employ and advance in employment qualified disabled veterans, recently separated veterans, active duty wartime or campaign badge veterans, and Armed Forces service medal veterans. These classifications are defined as follows:

- A "disabled veteran" is one of the following: (a) 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 (b) a person who was discharged or released from active duty because of a service-connected disability.
- A "recently separated veteran" means 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.
- An "active duty wartime or campaign badge veteran" means a veteran who served on active duty in the U.S. military, ground, naval, or air service during a war, or in a campaign or expedition for which a campaign badge has been authorized under the laws administered by the Department of Defense.
- An "Armed forces service medal veteran" means a 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.

Protected veterans may have additional rights under the Uniformed Services Employment and Reemployment Rights Act ("USERRA"). In particular, if you were absent from employment in order to perform service in the uniformed service, you may be entitled to be reemployed by your employer in the position you would have obtained with reasonable certainty if not for the absence due to service. For more information, call the U.S. Department of Labor's Veterans Employment and Training Service (VETS), toll-free, at 1-866-4-USA-DOL.

As a Government contractor subject to VEVRAA, the Company is required to submit a report to the United States Department of Labor each year identifying the number of the Company's employees belonging to each specified "protected veteran" category. If you believe you belong to any of the categories of protected veterans listed above, please indicate by checking the appropriate box below.

I BELONG TO THE FOLLOWING CLASSIFICATIONS OF PROTECTED VETERANS (CHOOSE ALL THAT APPLY):

- DISABLED VETERAN**
- RECENTLY SEPARATED VETERAN**
- ACTIVE WARTIME OR CAMPAIGN BADGE VETERAN**
- ARMED FORCES SERVICE MEDAL VETERAN**
- I am a protected veteran, but I choose not to self-identify the classification to which I belong.**
- I am NOT a protected veteran**

If you are a disabled veteran, it would assist the Company if you indicate whether there are accommodations the Company could make that would enable you to perform the essential functions of the job, including special equipment, changes in the physical layout of the job, changes in the way the job is customarily

performed, provision of personal assistance services, or other accommodations. This information will assist the Company in making reasonable accommodations for your disability.

Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information provided will be used only in ways that are not inconsistent with the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended.

The information you submit will be kept confidential, except that (i) supervisors and managers may be informed regarding restrictions on the work or duties of disabled veterans, and regarding necessary accommodations; (ii) first aid and safety personnel may be informed, when and to the extent appropriate, if you have a condition that might require emergency treatment; and (iii) Government officials engaged in enforcing laws administered by the Office of Federal Contract Compliance Programs, or enforcing the Americans with Disabilities Act, may be informed. If you hold one of these statuses, the Company would like to know for purposes of our Affirmative Action Plan (the "Plan"). This information will be recorded and utilized in a manner consistent with the statutes and regulations governing the Plan.

<b>PRINT NAME: (Last)</b>	<b>(First)</b>	<b>(Middle)</b>	<b>Date</b>

**Position:** \_\_\_\_\_