



Legacy Cooperative Association

P.O. Box 2188 • SCOTTSBLUFF, NEBRASKA 69363-2188
PHONE (308) 632-5301
FAX (308) 632-5375
www.legacycoop.com

Scottsbluff, NE	Hemingford, NE
Alliance, NE	Hay Springs, NE
Bridgeport, NE	Gordon, NE
Dalton, NE	Mirage Flats, NE
Kimball, NE	Oshkosh, NE
Torrington, WY	Martin, SD
Burns, WY	

Voluntary Self-Identification Information

Completion of this information is voluntary and is not a requirement of employment. This information will in no way affect the decision regarding your application for employment. This information will be kept confidential. We hope that you will complete this form to assist us in recording information for statistical reports that we are obliged to file periodically with various government agencies.

Name: _____ Date: _____

Position Applied For: _____

Applicants Identifying their Sex and Race

_____ Female _____ Male

_____ I decline to identify my race & ethnicity

Ethnicity

_____ Hispanic or Latino

_____ Not Hispanic or Latino

Race

Select all that apply

_____ American Indian or Alaska Native

_____ Asian

_____ Black or African American

_____ Native Hawaiian or Other Pacific Islander

_____ White

If applicable

_____ Two or More Races (Not Hispanic or Latino – Persons who identify with more than one of the above races)