



SELF-IDENTIFICATION OF DISABLED AND/OR VETERAN STATUS

If you wish to identify yourself as a person with a disability, a disabled Veteran, an Armed Forces service medal Veteran, an other protected Veteran, or a recently separated Veteran, please provide the information requested below. If you have submitted this information in the past, you need not do so again. If you are an individual with a disability, either Veteran or non-Veteran, and you wish to request an accommodation, please complete and submit an Accommodation Request Form. You may obtain this form from the Equal Opportunity Office, Human Resources, or download it from the [forms section](#) on the Equal Opportunity Office web site. If you have already requested and received an accommodation, you need not complete the form again. Disclosure of this information is entirely voluntary. No adverse consequences will result from either providing this information or declining to provide it. This information will be kept confidential, except that it may be shared with certain personnel, to the extent necessary, for purposes consistent with the requirements of the Rehabilitation Act of 1973 and/ or the Vietnam Era Veterans Readjustment Assistance Act of 1974.

NAME _____	POSITION _____
DEPARTMENT _____	ADDRESS _____
PHONE _____	BU ID# _____
DATE OF HIRE _____	TODAY'S DATE _____

I wish to identify myself as (please check all that apply, according to the definitions in the [Self-Identification section](#) of the Equal Opportunity website):

<input type="checkbox"/> an individual with a disability	<input type="checkbox"/> an Armed Forces service medal Veteran
<input type="checkbox"/> a recently separated Veteran; date of separation: _____	
<input type="checkbox"/> an other protected Veteran	<input type="checkbox"/> a disabled Veteran

**Please return this form to:
Equal Opportunity Office
25 Buick Street
Boston, MA 02215**

July 2009