

PATHWAY TO PURCHASE (First Time Homebuyers Assistance) Equal Opportunity Data Collection

Borrower:	Co-Borrower:	
Because of your applying for assistance to funds, the Agency providing the assistance of the Household for statistical purpose only made available to all persons on a non-disc	is required to obtain the fo y to determine whether the	llowing information from the Head
To be completed	by the Head of the House	ehold only:
What is your gender?	Male:	Female:
Are you a person with a disability?	Yes:	No:
Are you a person age 62 or older?	Yes:	No:
Are you a female head of household?	Yes:	No:
Are you a Military Veteran?	Yes:	No:
What is your Race? Do you identify yourse	elf as (select one or more):	
American Indian or Alaska Native: North and South America (including community attachment. Asian: A person having origins in a the Indian subcontinent including, f Pakistan, the Philippine Islands, The Black or African American: A perso Native Hawaiian or Other Pacific Is of Hawaii, Guam, Samoa, or other White	g Central America) and whomy of the original peoples of contexample, Cambodia, Chailand and Vietnam. In having origins in any of the context	o maintains tribal affiliation or of the Far East, Southeast Asia, or hina, India, Japan, Korea, Malaysia he black racial groups of Africa.
What is your Ethnicity? Do you identify your	rself as (select only one):	
Hispanic or Latino: A person of Cultonian other Spanish culture or origin, regarded addition to "Hispanic or Latino".		
Not Hispanic or Latino: A person no American, or other Spanish culture		
CERTIFICATION OF APPLICANT		
The Applicant certifies that all information s complete and to the best of the Applicant's		s as Head of Household is true,

DATE: _____

BORROWER: _____