

Ethnicity and Race Data Collection Form

STUDENTS NAME: _____ **DATE:** _____

QUESTION 1. Is your child of Hispanic or Latino origin? (Check all that apply.)

NOT HISPANIC/LATINO
CUBAN
DOMINICAN
SPANIARD
PUERTO RICAN

MEXICAN/ MEXICAN AMERICAN/ CHICANO
CENTRAL AMERICAN
SOUTH AMERICAN
LATIN AMERICAN
OTHER HISPANIC/LATINO

QUESTION 2. What race(s) do you consider your child? (Check all that apply.)

AFRICAN AMERICAN/ BLACK
WHITE

ASIAN INDIAN
CAMBODIAN
CHINESE
FILIPINO
HMONG
INDONESIAN
JAPANESE
KOREAN
LAOTIAN
MALAYSIAN
PAKISTANI
SINGAPOREAN
TAIWANESE
THAI
VIETNAMESE
OTHER ASIAN

NATIVE HAWAIIAN
FIJIAN
GUAMANIAN or CHAMORRO
MARIANA ISLANDER
MELANESIAN
MICRONESIAN
SAMOAN
TONGAN
OTHER PACIFIC ISLANDER

ALASKA NATIVE
CHEHALIS
COLVILLE
COWLITZ
HOH
JAMESTOWN
KALISPEL
LOWER ELWHA
LUMMI
MAKAH
MUCKLESHOOT
NISQUALLY
NOOKSACK
PORT GAMBLE KLALLAM
PUYALLUP
QUILEUTE
QUINAULT
SAMISH
SAUK-SUIATTLE
SHOALWATER
SKOKOMISH
SNOQUALMIE
SPOKANE
SQUAXIN ISLAND
STILLAGUAMISH
SUQUAMISH
SWINOMISH
TULALIP
YAKAMA
OTHER WASHINGTON INDIAN
OTHER AMERICAN INDIAN