

---

# KENTUCKY UNIVERSITY

---

## COOPERATIVE EXTENSION

UK MARTIN-GATTON COLLEGE OF AGRICULTURE, FOOD AND ENVIRONMENT  
KSU COLLEGE OF AGRICULTURE, HEALTH, AND NATURAL RESOURCES

---

The purpose of this questionnaire/form is to gather race, ethnicity, and gender information about persons who apply and participate in this Extension/USDA program. The information you provide will not be used when reviewing any application or when determining whether you are eligible to participate in this program. This is a voluntary questionnaire. You are not required to give this information, but we hope you will because the information you give will be used to improve the operation of this program, to help Extension/USDA design additional opportunities for program participation, and to monitor enforcement of laws that require equal access to this program for eligible persons. If you have previously provided your contact information, you only need to note your race, gender and ethnicity on the form. Your information will be kept private to the extent permitted by law. Thank you for your response.

Name	Address	Email	Race *	Gender **	Hispanic ***
------	---------	-------	-----------	--------------	-----------------