



# RBEG RLF PROGRAM EMPLOYEE DATA TRACKING FORM

FOR EMPLOYER USE	FOR REGION XII USE
BUSINESS NAME:	LOAN NO.
AUTHORIZED SIGNATURE:	STAFF REVIEW:

SECTION ONE

**\*\*PLEASE READ ALL INSTRUCTIONS CAREFULLY BEFORE PROCEEDING\*\***

The information this form is required in order to insure that businesses participating in the CDC RBEG Revolving Loan Fund Program are complying with federal requirements for the program. Please note that this information will be placed in your confidential personnel file and will only be available to your employer and CDC and Region XII Development Corporation (as CDC's designated loan servicing agent) program staff. This information WILL NOT be available to the public, and will not in any way affect your employment here or elsewhere.

*\*\*If you have questions, before completing this form, please contact Joe Behrens at Region XII Development Corporation at (712) 792-9914\*\**

**EMPLOYEE'S PRINTED NAME:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

**SOCIAL SECURITY NO.** \_\_\_\_\_

**DATE OF HIRE:** \_\_\_\_\_

**EMPLOYMENT CLASSIFICATION:**       FULL-TIME       PART TIME

SECTION TWO

**\*\*IMPORTANT NOTICE TO ALL EMPLOYEES\*\***

The following information regarding race, ethnicity, and gender is requested by the Federal Government in order to monitor compliance with Federal Laws prohibiting discrimination against applicants seeking employment with a business participating in the Revolving Loan Fund program. You are not required to furnish this information, but are encouraged to do so. If you choose not to complete this section, check the appropriate box below. If you choose not to complete this section, your employer is required to note the race/national origin of individual applicants on the basis of visual appearance or surname. **The information on this page will not be used in evaluating your application or to discriminate against you in any way. Providing this information will not affect your employment with this business.**

I DO NOT WISH TO PROVIDE THIS INFORMATION.

NOTE: MARK ONLY ONE BOX PER SECTION

RACE	ETHNICITY	GENDER
<input type="checkbox"/> ASIAN		
<input type="checkbox"/> WHITE		
<input type="checkbox"/> BLACK OR AFRICAN-AMERICAN	<input type="checkbox"/> HISPANIC OR LATINO	<input type="checkbox"/> MALE
<input type="checkbox"/> AMERICAN INDIAN/ALASKA NATIVE	<input type="checkbox"/> NON-HISPANIC OR LATINO	<input type="checkbox"/> FEMALE
<input type="checkbox"/> NATIVE HAWAIIAN OR PACIFIC ISLANDER		

SECTION TWO COMPLETED BY:       Employee       Employer

# INSTRUCTIONS TO EMPLOYERS ON COMPLETING EMPLOYEE DATA TRACKING FORMS

CDC is required by the Federal Government to collect information on employees hired by businesses receiving assistance through the RBEG Revolving Loan Fund program. These employers are required to have every employee complete the Employee Certification form, and should distribute the appropriate form to new employees at the time of or shortly after their hire.

Employers should fill in the employer's name where indicated near the top of the form. Employees or employers may complete Section One, as long as a form is completed for each employee. The information in Section Two is optional; however, if the employee chooses not to complete Section Two, it must be completed by the employer based on visual appearance and/or the employee's surname, and the employer shall indicate such at the bottom of the Section.

After the employee has completed the form, an authorized representative of the business must sign at the top and the form or a copy must be submitted to Region XII Development Corporation. Employers may keep the original or a copy of this form, but the information on this form must be kept confidential and absolutely **must not be used by the employer to discriminate against the employee in any way.**

Any questions regarding this form or the information requested hereon should be directed to Joe Behrens at (712) 792-9914.