

**LANTA Application for Employment  
Equal Employment Opportunity (EEO) & Affirmative Action (AA) Form**

**This form is optional, and not required to be considered for employment.**

The Lehigh and Northampton Transportation Authority (LANTA) has a strong commitment to the community we serve and our employees. As an **Equal Opportunity Employer**, we strive to have a workforce that reflects the community we serve. No person is unlawfully excluded from employment opportunities based on race, color, religion, national origin, sex (including gender identity, sexual orientation, and pregnancy), age, genetic information, disability, veteran status, ancestry, medical condition, marital status, citizenship status, and any other protected class.

LANTA's Equal Employment Opportunity (EEO) policy applies to all employment actions, including but not limited to, recruitment, hiring, selection for training, promotion, transfer, demotion, layoff, termination, rates of pay, or other forms of compensation.

All applicants and employees have the right to file complaints alleging discrimination. Retaliation against an individual who files a charge or complaint of discrimination, participates in an employment discrimination proceeding (such as an investigation or lawsuit), or otherwise engages in protected activity is strictly prohibited and will not be tolerated.

LANTA is committed to providing reasonable accommodations to applicants and employees who need them because of a disability or to practice or observe their religion, absent undue hardship.

In order to assist with Federal Transit Administration (FTA) statistical reports, we ask that you complete the following questions. **Completion of this form is voluntary and is used solely in connection with LANTA's EEO and Affirmative Action programs.** This information will not be used by the selection committee for your position and will only be viewed after the position has been filled for statistical analysis. All information obtained will be kept confidential and refusal to provide it will not subject the applicant to any adverse treatment.

First Name:	Last Name:	Middle Initial:

Address:

City:	State:	Postal Code:

Date of Birth:	Social Security Number:	Today's Date:						
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Phone Number:	Veteran:	Gender:
	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Decline to Respond	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Decline to Respond

Race / Ethnicity:					
<input type="checkbox"/> White	<input type="checkbox"/> Black or African American	<input type="checkbox"/> Hispanic or Latino	<input type="checkbox"/> Asian American	<input type="checkbox"/> Multi-racial	
<input type="checkbox"/> American Indian / Alaskan Native	<input type="checkbox"/> Native Hawaiian and Other Pacific Islander				
<input type="checkbox"/> Decline to Respond					

I understand the purpose and intent of this form to assist LANTA with its affirmative action & EEO programs and agree that any misrepresentation will be sufficient cause for cancellation of my employment application and dismissal for LANTA's service if I have been employed. I further recognize that the completion of this form is voluntary and that refusal to provide it will not subject the applicant to any adverse treatment, nor does it guarantee my employment.

Signature of Applicant:	Date Signed: