Community Development Grants Administration

YEAR 2027- EQUAL EMPLOYMENT OPPORTUNITY(EEO-1) Form

Employment Data on Employees of Agencies Receiving Federal Funds (Required for agencies receiving Federal funds; report all employees)

JOB CATEGORIES (see descriptions on back)	Number of Employees (report Employees in only one category)														
	Race/Ethnicity														
	Hispanic or Latino		Not Hispanic or Latino												Total of Columns A-N
			Male						Female						
	Male	Female	White	Black or African American	Native Hawaiian or other Pacific Islander	Asian	American Indian or Alaska native	Two or More races	White	Black or African American	Native Hawaiian or other Pacific Islander	Asian	American Indian or Alaska native	Two or More races	
	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O
Executive/Senior Level Officials and Managers															0
Mid-Level Officials and Managers															0
Professionals															
Technicians															
Sales Workers															
Administrative Support Workers															
Craft Workers															
Laborers and Helpers															
Service Workers															
TOTAL	0	0	0	0	0	0	0	0							

Agency Name _____ **Address**_____

Name of Certifying Official _____ **Title** _____ **Phone:** _____

OMB No. 3048-0007