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| **Office of Diversity & Inclusion** | | | | **Workforce**  **Employment Data Sheet (Employee Roster)**  **REVISED 6/14/19FLW** | | | | | | | |
| **Project # & Name:** | Click here to enter text. | | | | | | |
| Workforce goals established on this project are percentages of the total labor hours. Percentages are as follows: **25% Minorities | 7% Women | 23% County (CTY) Resident**  Please fill in all areas of this form and return to the Office of Diversity & Inclusion immediately. Additions to this list should be sent directly to the Diversity & Inclusion Compliance Specialist assigned via email. | | | | | | | | | | | |
| **Date:** | Click here to enter a date. | **Contractor Name:** | Click here to enter text. | | | | Federal Tax ID: | | | Click here to enter text. | |
| **Prime Contractor** | | **Address:** | Click here to enter text. | | | State: | | Select | Zip: | | Click here to enter text. |
| **Subcontractor** | |
| |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | **No.** | **Employee**  **Last Name, First, Middle Initial** | **Address**  **Street, City, State, Zip Code** | **Ethnicity** | **Gender** | **Trade** | **CTY**  **Res.** | | 1. | Click here to enter text. | Click here to enter text. | Select | Select | Select |  | | 2. | Click here to enter text. | Click here to enter text. | Select | Select | Select |  | | 3. | Click here to enter text. | Click here to enter text. | Select | Select | Select |  | | 4. | Click here to enter text. | Click here to enter text. | Select | Select | Select |  | | 5. | Click here to enter text. | Click here to enter text. | Select | Select | Select |  | | 6. | Click here to enter text. | Click here to enter text. | Select | Select | Select |  | | 7. | Click here to enter text. | Click here to enter text. | Select | Select | Select |  | | 8. | Click here to enter text. | Click here to enter text. | Select | Select | Select |  | | 9. | Click here to enter text. | Click here to enter text. | Select | Select | Select |  | | 10. | Click here to enter text. | Click here to enter text. | Select | Select | Select |  | | 11. | Click here to enter text. | Click here to enter text. | Select | Select | Select |  | | 12. | Click here to enter text. | Click here to enter text. | Select | Select | Select |  | | 13. | Click here to enter text. | Click here to enter text. | Select | Select | Select |  | | 14. | Click here to enter text. | Click here to enter text. | Select | Select | Select |  | | 15. | Click here to enter text. | Click here to enter text. | Select | Select | Select |  | | 16. | Click here to enter text. | Click here to enter text. | Select | Select | Select |  | | 17. | Click here to enter text. | Click here to enter text. | Select | Select | Select |  | | 18. | Click here to enter text. | Click here to enter text. | Select | Select | Select |  | | 19. | Click here to enter text. | Click here to enter text. | Select | Select | Select |  | | 20. | Click here to enter text. | Click here to enter text. | Select | Select | Select |  |   **Employment Data** | | | | | | | | | | | |

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**Contractor’s Authorized Representative (Signature) Title**

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**Contractor’s Authorized Representative (Print Name)**