

**Federal Data Form
Arkansas 4-H
Arkansas Outdoor School**

Please provide the following numbers for your group, include youth and adults. Fill out on the day of the program with only the actual number attending.

This information is requested solely for the purposes of determining compliance with federal civil rights law, and your response will not affect your eligibility to participate in Extension programs. By providing this information, you will assist us in assuring that this program is administered in a nondiscriminatory manner.

School/Group _____

Teacher _____

County _____

Program Date _____

Grade Level _____

Total attending _____

YOUTH NUMBERS:

	MALE	FEMALE
Ethnicity: Hispanic	_____	_____
(For Hispanic numbers, please also include numbers on one of the following; do not include Ethnicity: Hispanic numbers in the Total)		
White	_____	_____
Black/African American	_____	_____
Am. Indian or Alaska Native	_____	_____
Hawaiian or Pacific Islander	_____	_____
Asian	_____	_____
Two or More Races/Other Race	_____	_____
TOTAL	_____	_____

ADULT NUMBERS:

	MALE	FEMALE
Ethnicity: Hispanic	_____	_____
(For Hispanic numbers, please also include numbers on one of the following; do not include Ethnicity: Hispanic numbers in the Total)		
White	_____	_____
Black/African American	_____	_____
Am. Indian or Alaska Native	_____	_____
Hawaiian or Pacific Islander	_____	_____
Asian	_____	_____
Two or More Races/Other Race	_____	_____
TOTAL	_____	_____