



**CALIFORNIA INSTITUTE OF TECHNOLOGY**  
Office of the Registrar

**Race and Ethnicity Reporting Change Form**

Student Name: \_\_\_\_\_ UID: \_\_\_\_\_

Date: \_\_\_\_\_

**ETHNIC/RACIAL GROUP**

Title VI, Civil Rights Act of 1964 (PL88-352) requires that the Institute collect the following information for all **American citizens** and **permanent resident aliens**. This information will be treated as confidential.

Do you consider yourself to be Hispanic/Latino?

Yes  No

In addition, select one or more of the following racial categories to describe yourself:

- American Indian or Alaskan Native
- Asian
- Black or African American
- Native Hawaiian or Pacific Islander
- White

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

*Student: Please submit to the Office of the Registrar*