

# MEDPREP Applicant Demographic Data Form

Demographic information is collected for statistical purposes only. The information on this form is not part of your application for MEDPREP admission and will not be used to make admissions decisions.

## Name and e-mail

First Name

Middle Name

Last Name

Suffix

Email

### I. Gender Identity

a. **Gender** (Answer this based on the gender with which you identify, which may or may not be the sex you were assigned at birth).

Man

Woman

Another gender identity

(Decline to Answer)

b. **Gender identity**

If other please describe

c. **Pronouns** Please select the set of pronouns you want people to use to refer to you:

If other please describe

### II. Ethnic Self-Identification

Hispanic, Latino or of Spanish Origin

Yes

No

If YES/other, please describe your preferred ethnic self-identification

### III. Racial Self-Identification

American Indian or Alaskan

Tribal Nation Affiliation

Asian

If other, please describe

Black or African American

If other, please describe

Native Hawaiian or Other Pacific Islander

White

Other