

ETHNIC AND RACIAL DATA FORM

Institution Name: _____ Agreement # _____	
Site Name: _____ Address: _____	
Institution Contact: _____	
Section I. Ethnic Categories	Number of Participating Children or Adults
Hispanic or Latino. (A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race).	
Not Hispanic or Latino. (All persons not fitting in one of the above described categories)	
Section II. Race Categories <i>(one or more categories may be selected for a participant)</i>	Number of Participating Children or Adults
American Indian or Alaska Native. (A person having origins in any of the original peoples of North and South America, (including Central America), and who maintains cultural identification through tribal affiliation or community recognition (includes Aleuts and Eskimos).	
Asian. (A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam).	
Black or African American. (A person having origins in black racial groups of Africa).	
Native Hawaiian or Other Pacific Islander. (A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands).	
White. (A person having origins in any of the original peoples of Europe, North Africa, or the Middle East).	
Institution's Authorized Representative	Date _____

Note: CACFP regulations require that each institution collect the ethnic and racial data from each site each year. This includes child care centers, family day care homes, adult day care centers, at-risk afterschool programs, outside-school hours care centers, and homeless shelters.

The institution must retain ethnic and racial data for 3 years and must safeguard this information. The institution must have procedures on file for maintaining the confidentiality of data collected on individuals.

ETHNIC AND RACIAL DATA FORM

Instructions for Completing the Ethnic and Racial Data Form

Ethnic and Racial Data Collection are required by *FNS Instruction 113-1 Civil Rights Compliance and Enforcement – Nutrition Programs and Activities, Appendix B,F Data Collection,2 CACFP, (b) Collecting and Maintaining Actual Beneficiary Data*

The institution may use participant/parent self-identification or visual identification or to determine a participant's ethnic and racial category. Self-identification is the preferred method.

- To use the participant/parent **self-identification method**, the institution should take the information on Ethnic Identity and Race of Participant from the Income Eligibility Application form, if applicable and compile the information on the Ethnic and Racial Data Form.
- To use the **visual identification method**: by visual observation, using your best judgment, first count the number of children (or adults if adult day care) in each ethnic category.

ETHNICITY: Each participant should be counted under only one category for ethnicity. The total number of participants marked under the ethnic category should equal the total number of participants in attendance on the day the form is completed. Record those numbers in Section I.

RACE: Each participant may be counted under more than one category for race. The total number of participants marked under the race category may be a larger sum than the total number of participants in attendance on the day. Indicate the number of children or adults in care in each racial category in Section II.

- If using the **visual identification method**, institutions must notify the parents/guardians in writing before collecting the data. See sample of Notice of Annual Collection of Ethnic and Racial Data on nutritionnc.com. Click on Special Nutrition Programs, Child and Adult Care Food Program, Forms, Recordkeeping.

IMPORTANT!

The institution must retain ethnic and racial data for 3 years and must safeguard this information. Access to Program records containing ethnic/racial data should be limited to authorized personnel.