

APPENDIX C

Confidential Personal Information Form

Please take a few moments to complete this form. The information you provide will be used to develop a statistical participant summary, an important part of the report. No individual personal information will be identified in the report.

1. How long have you worked at UC Berkeley: *Please check the appropriate category.*

- ¹ 0-3 yrs. ² 4-6 yrs. ³ 7-10 yrs. ⁴ 10-15 yrs. ⁵ 15-20 yrs. ⁶ 20+ yrs

2. How long have you been in your current job: _____

3. What is your current job/payroll title (e.g., __Assistant II): _____

4. Do you supervise staff? ¹ Yes ² No

5. Race/Ethnicity: *Please check the one category that best describes you.*

- | | |
|---|--|
| ¹ <input type="checkbox"/> Black/African American | ⁴ <input type="checkbox"/> Asian/Pacific Islander |
| ² <input type="checkbox"/> Mixed Race/Ethnicity (please specify):
_____ | ⁵ <input type="checkbox"/> Chicano/Latino/Hispanic |
| ³ <input type="checkbox"/> American Indian/Alaska Native | ⁶ <input type="checkbox"/> White/Caucasian |
| | ⁷ <input type="checkbox"/> Other (please specify):
_____ |

6. What is your gender? ¹ Female ² Male

7. Current Age: *Please check the appropriate age category.*

- ¹ under 21 ² 21-25 ³ 26-35 ⁴ 36-45 ⁵ 46-55 ⁶ 55+

8. Where do you work: *Please check one category that best describes the kind of unit you work in.*

- | | |
|---|---|
| ¹ <input type="checkbox"/> Academic Department | ⁵ <input type="checkbox"/> Library |
| ² <input type="checkbox"/> Administrative Services Unit
(e.g., Financial & Business Services, etc.) | ⁶ <input type="checkbox"/> Research Unit |
| ³ <input type="checkbox"/> Facilities Services Unit | ⁷ <input type="checkbox"/> Student Services Unit |
| ⁴ <input type="checkbox"/> Information Technology | ⁸ <input type="checkbox"/> Other: _____ |

9. What department do you work in (*optional*): _____