



Dear Homeowner,

First, we want to congratulate you on your new home purchase! This is a very exciting time for you and your family!

At OHCS we care about our communities, and as part of our Statewide Housing Plan we are striving to serve a more diverse Oregon. In order to ensure we have accurately collected your information please fill out the section below.

If you would like to see how we are doing check us out here:

[www.public.tableau.com/oregon.housing.and.community.services](http://www.public.tableau.com/oregon.housing.and.community.services)

Thank you in advance, Oregon Housing and Community Services, Homeownership division.

**Borrower**

**Ethnicity:** Check one or more

<input type="checkbox"/> Hispanic or Latino	
<input type="checkbox"/> Mexican	<input type="checkbox"/> Puerto Rican
<input type="checkbox"/> Cuban	<input type="checkbox"/> Other Hispanic or Latino <i>Print Origin</i> _____ For example: <i>Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.</i>
<input type="checkbox"/> Not Hispanic or Latino	
<input type="checkbox"/> I do not wish to provide this information	

**Sex**

<input type="checkbox"/>	Female
<input type="checkbox"/>	Male
<input type="checkbox"/>	Non-Binary
<input type="checkbox"/>	I do not wish to provide this information

**Race:** Check one or more

<input type="checkbox"/> American Indian or Alaska Native <i>Print name of enrolled or principle tribe:</i> _____		
<input type="checkbox"/> Asian		
<input type="checkbox"/> Asian Indian	<input type="checkbox"/> Chinese	<input type="checkbox"/> Filipino
<input type="checkbox"/> Japanese	<input type="checkbox"/> Korean	<input type="checkbox"/> Vietnamese
<input type="checkbox"/> Other Asian <i>Print Race:</i> _____ For example: <i>Hmong, Laotian, Thai, Pakistani, Cambodian, and so on.</i>		
<input type="checkbox"/> Black or African American		
<input type="checkbox"/> Native Hawaiian or Other Pacific Islander		
<input type="checkbox"/> Native Hawaiian	<input type="checkbox"/> Guamanian or Chamorro	<input type="checkbox"/> Samoan
<input type="checkbox"/> Other Pacific Islander <i>Print Race</i> _____ For example: <i>Fijian, Tongan, and so on.</i>		
<input type="checkbox"/> White		
<input type="checkbox"/> Latin American		
<input type="checkbox"/> I do not wish to provide this information		

Borrower \_\_\_\_\_

Date \_\_\_\_\_



**Co-Borrower**

**Ethnicity:** Check one or more

<input type="checkbox"/> <b>Hispanic or Latino</b>  <input type="checkbox"/> Mexican <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban  <input type="checkbox"/> Other Hispanic or Latino <i>Print Origin</i> _____ For example: <i>Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.</i>	
<input type="checkbox"/> <b>Not Hispanic or Latino</b>	
<input type="checkbox"/> <b>I do not wish to provide this information</b>	

**Sex**

<input type="checkbox"/>	Female
<input type="checkbox"/>	Male
<input type="checkbox"/>	Non-Binary
<input type="checkbox"/>	I do not wish to provide this information
<input type="checkbox"/>	

**Race:** Check one or more

<input type="checkbox"/> <b>American Indian or Alaska Native</b> <i>Print name of enrolled or principle tribe:</i> _____	
<input type="checkbox"/> <b>Asian</b> <input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other Asian <i>Print Race:</i> _____ For example: <i>Hmong, Laotian, Thai, Pakistani, Cambodian, and so on.</i>	
<input type="checkbox"/> <b>Black or African American</b>	
<input type="checkbox"/> <b>Native Hawaiian or Other Pacific Islander</b> <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Guamanian or Chamorro <input type="checkbox"/> Samoan  <input type="checkbox"/> Other Pacific Islander <i>Print Race:</i> _____ For example: <i>Fijian, Tongan, and so on.</i>	
<input type="checkbox"/> <b>White</b>	
<input type="checkbox"/> <b>Latin American</b>	
<input type="checkbox"/> <b>I do not wish to provide this information</b>	

Co-Borrower \_\_\_\_\_

Date \_\_\_\_\_