- 1. What is your first and last name? (Short answer)
- 2. Are you applying for yourself or nominating someone else? (Multiple choice)

I am applying for myself

I am nominating someone else

What is the nominee's first and last name?

- 3. Which department do you (or the nominee) work in? (For example: Administration, Dietary/Nutrition Services, Facility Management, Nursing, Pastoral Care, etc.) (Short answer)
- 4. Please describe your (or the nominee's) job title and briefly describe your (or the nominee's) job duties. (Short paragraph)
- 5. What type of workforce member are you (or the nominee)? (Multiple choice)

County employee

Non-County workforce member

6. What shift do you (or the nominee) work? (Multiple choice)

Day Shift

Evening Shift

Night Shift

7. What is your (or the nominee's) age range? (Multiple choice)

18-45

46-55

56-65

66-75

75+

Chose not to disclose

8. What is your (or the nominee's) racial and ethnic identity? (Choose all that apply)

American Indian or Alaska Native

Arab, Middle Eastern, or SWANA

Asian

Black or African
Hispanic or Latinx
Native Hawaiian or Other Pacific Islander
White or European
Choose not to disclose

9. What is your (or the nominee's) current sexual orientation? (Multiple choice)

Straight or heterosexual

Lesbian, gay or homosexual

Bisexual

Something else (E.g. asexual, pansexual, queer, etc.) Please specify:

Choose not to disclose

10. What is your (or the nominee's) current gender identity? (Multiple choice) Identifies as male

Identifies as female

Transgender male/Trans man

Transgender female/Trans woman

Something else (E.g. non-binary, gender fluid, queer, etc.) Please specify:

11. Do you (or the nominee) identify as disabled? (Multiple choice)

Yes

No

Choose not to disclose

- 12. Please describe why diversity, equity, inclusion, and antiracism are important to you (or the nominee). (200 words maximum)
- 13. Please share any experiences you (or the nominee) have had in advocating for people with different identities to be included, heard, and treated fairly. (200 words maximum)
- 14. Please describe the skills, experience, and/or knowledge you (or the nominee) would bring to the LAC+USC Medical Center EDIA Subcommittee. (200 words maximum)

15. Please describe what EDIA changes you (or the nominee) would like to see at LAC+USC Medical Center and DHS. (200 words maximum)
16. Please describe what family and friends would say about you (or the nominee).(100 words maximum)
17. Anything else you would like to add (100 words maximum)