|  |  |
| --- | --- |
| Logo - OGS - MWBE | EQUAL EMPLOYMENT OPPORTUNITY STAFFING PLAN |

SUBMIT WITH BID OR PROPOSAL or within a reasonable time thereafter as requested by OGS, but prior to Contract Award.

|  |  |  |
| --- | --- | --- |
| **Solicitation No.:** | **Reporting Entity:**  Contractor  Subcontractor | Report includes Contractor’s  Contractor’s work force to be utilized on this contract  Contractor’s total work force  Subcontractor’s work force to be utilized on this contract  Subcontractor’s total work force |
| **Contractor/Subcontractor’s Name:** | |
| **Contractor/Subcontractor’s Address:**    **FEIN***:* | |

Enter the total number of employees for each classification:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| EEO Job Category | Total Work Force | Work force by Gender | | Work force by  Race/Ethnic Identification | | | | | | | | | | |  | | | | |
| Total  Male  (M) | Total  Female  (F) | White(M) (F) | | Black  (M) (F) | | | Hispanic  (M) (F) | | Asian  (M) (F) | | American Indian or Alaskan Native  (M) (F) | | Veteran  (M) (F) | | | (M) (F) | |
| Executive/Senior level Officials & Managers |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |
| First/Mid-level officials & Managers |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |
| Professionals |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |
| Technicians |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |
| Sales Workers |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |
| Administrative Support Workers |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |
| Craft Workers |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |
| Operatives |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |
| Laborers and Helpers |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |
| Service Workers |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |
| Totals |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |
| **PREPARED BY (Signature):** | | | | | | | **TELEPHONE NO.:**  **EMAIL ADDRESS:** | | | | | | | | | | **DATE:** | | |
| **NAME AND TITLE OF PREPARER (Print or Type):** | | | | | | | | | | | | | | | | | | | |

**EEO 100 Rev05**