

Department or Office _____

Position _____ Term of Appointment _____ Year(s) to begin _____

Date of Application	Name	Gender	Source of Referral	Disposition*	EEO Code**

* Disposition A – Interviewed at Mount Holyoke, appointment recommended D – Application rejected
 B – Interviewed at Mount Holyoke, appointment not recommended E – Application filed for future consideration
 C - Preliminary Interview

**EEO Code: 1 – White, 2 – Black, 3 – Hispanic, 4 – Asian or Pacific Islander, 5 – American Indian or Alaskan Native, 6 – Cape Verdean