

**United States Office of Personnel Management**  
**Outstanding Scholar Provision Reporting Form for the *Luevano* Consent Decree**

|  |   |          |                                  |    |
|--|---|----------|----------------------------------|----|
| 1. Occupation  |   |          | 2. Reporting Period (MM/DD/YYYY) |    |
| a. Series  | b. Grade  | c. Title | From                             | To |
| 3. Title of Department, Independent Establishment, or Government Corporation |   |          | 4. Address of Submitting Office  |    |
| 5. Name of Submitting Office   |   |          |                                  |    |
| 6. Missing Data  | 7. Name of Agency Contact and Telephone Number(s) |          |                                  |    |

**Number of Qualified\* Applicants by Zone**

| Designation Category                 | Geographic Zones** |            |           |                 |                  |           |              |           |                   | Nationwide |
|--------------------------------------|--------------------|------------|-----------|-----------------|------------------|-----------|--------------|-----------|-------------------|------------|
|                                      | 1. Atlanta         | 2. Chicago | 3. Dallas | 4. Philadelphia | 5. San Francisco | 6. Alaska | 7. Caribbean | 8. Hawaii | 9. Washington, DC |            |
| A. American Indian or Alaskan Native |                    |            |           |                 |                  |           |              |           |                   |            |
| B. Asian or Pacific Islander         |                    |            |           |                 |                  |           |              |           |                   |            |
| C. Black, not of Hispanic origin     |                    |            |           |                 |                  |           |              |           |                   |            |
| D. Hispanic                          |                    |            |           |                 |                  |           |              |           |                   |            |
| E. White, not of Hispanic origin     |                    |            |           |                 |                  |           |              |           |                   |            |
| F. Other qualified applicants        |                    |            |           |                 |                  |           |              |           |                   |            |
| <b>Zone Totals</b>                   |                    |            |           |                 |                  |           |              |           |                   |            |

\* Only those applicants who meet the appropriate qualification requirements for the position.

\*\* Zone definitions are on the reverse side of OPM Form 1386B, Applicant Race and National Origin Questionnaire.

## Instructions for Completing the Outstanding Scholar Provision Reporting Form for the *Luevano* Consent Decree

| Item  | Instructions for Completing   |
|---|---|
| 1. Occupation   |   |
| a. Series   | Enter the four digit classification series.   |
| b. Grade  | Enter the grade for this report, either 05 or 07.   |
| c. Title  | Enter the occupational title.   |
| 2. Reporting Period   | Enter the reporting period covered; e.g., 01/01/2002 to 12/31/2002.   |
| 3. Title of Department,<br>Independent Establishment<br>or Government Corporation | Enter your organizational title, e.g., Veterans Administration,<br>General Services Administration.   |
| 4. Address of Submitting<br>Office  | Enter address of office that prepared the report.   |
| 5. Name of Submitting<br>Office   | Enter the name of the office that prepared the report, e.g.,<br>Office of Personnel Operations.   |
| 6. Missing Data   | Enter the number of <u>qualified</u> applicants that either did not<br>complete or return the Applicant Race and National Origin<br>Questionnaire, OPM Form 1386B.  |
| 7. Name of Agency Contact<br>and Telephone Number(s)                              | Enter the name and phone number(s) of designated agency<br>contact for questions in this area.  |
| Number of Qualified*<br>Applicants by Zone  | From OPM Form 1386B, Applicant Race and National Origin<br>Questionnaire, enter counts of qualified applicants for each<br>race and national origin category broke down by Geographic<br>Zones. Geographic zone is determined from item 6,<br>Location of Position, on the Applicant Race and National<br>Origin Questionnaire. A list showing the coverage of each<br>geographic zone is provided on the back of the<br>questionnaire. Please provide the total number of applicants<br>for all zones in Zone Totals and the total number of<br>applicants nationwide for each designation category under<br>Nationwide. |