



**Department of Health  
Developmental Disabilities Supports Division  
Family Infant Toddler Program**



**Race and Ethnicity Tracking Form**

Date Completed:	Agency Name:
Child's Name:	
Date of Birth:	
Person Completing Form: (Full Name and Title/Role)	

*What is this child's ethnicity? (Mark ✓ only one)*

<input type="checkbox"/>	Hispanic/Latino	A child of Cuban, Mexican, Puerto Rican, Central or South American, or other Spanish culture or origin (including New Mexican Spanish colonial descendants), regardless of race.
<input type="checkbox"/>	Not Hispanic or Latino	A child not of Spanish culture or origin, regardless of race.

*What is this child's race? (Mark ✓ one or more races)*

<input type="checkbox"/>	American Indian or Alaska Native	A child having origins in any of the original peoples of the Americas. <i>(Please indicate tribal affiliation or community attachment below)</i>
<input type="checkbox"/>	Asian	A child having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent. This includes, for example, Cambodia, China, India, Japan, Korea, Laos, Malaysia, Pakistan, the Philippine Islands, Thailand, Tibet and Vietnam.
<input type="checkbox"/>	Black or African American	A child having origins in any of the Black racial groups of Africa.
<input type="checkbox"/>	Native Hawaiian or Other Pacific Islander	A child having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
<input type="checkbox"/>	White	A child having origins in any of the original peoples of Europe, the Middle East, or North Africa.

*If child is American Indian, please indicate Tribal Affiliation (Mark ✓ one or more)*

<input type="checkbox"/>	Acoma Pueblo	<input type="checkbox"/>	Picuris Pueblo	<input type="checkbox"/>	Santo Domingo Pueblo
<input type="checkbox"/>	Apache -- Jicarilla	<input type="checkbox"/>	Pojoaque Pueblo	<input type="checkbox"/>	Taos Pueblo
<input type="checkbox"/>	Apache -- Mescalero	<input type="checkbox"/>	San Felipe Pueblo	<input type="checkbox"/>	Tesuque Pueblo
<input type="checkbox"/>	Cochiti Pueblo	<input type="checkbox"/>	San Ildefonso Pueblo	<input type="checkbox"/>	Ysleta Del Sur Pueblo
<input type="checkbox"/>	Isleta Pueblo	<input type="checkbox"/>	San Juan Pueblo	<input type="checkbox"/>	Zia Pueblo
<input type="checkbox"/>	Jemez Pueblo	<input type="checkbox"/>	Sandia Pueblo	<input type="checkbox"/>	Zuni Pueblo
<input type="checkbox"/>	Laguna Pueblo	<input type="checkbox"/>	Santa Ana Pueblo	<input type="checkbox"/>	Native American - Other tribe
<input type="checkbox"/>	Nambe Pueblo	<input type="checkbox"/>	Santa Clara Pueblo	<input type="checkbox"/>	Native American - Unspecified
<input type="checkbox"/>	Navajo				

*How was this information obtained? (Mark ✓ only one)*

<input type="checkbox"/>	Parent or Family Identification (preferred method)	<input type="checkbox"/>	Team Identification	<input type="checkbox"/>	Combination of both
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*Please keep this Race and Ethnicity Tracking Form on file in client record for data entry.*



Guidelines for completing Family Infant Toddler Program  
Race and Ethnicity Tracking Form

1. Form to be used for all children effective July 1, 2009.
2. Form should be filled out with parent/guardian at Intake, IFSP meeting and/or six month review meeting.
3. It should not be necessary to have a “special meeting” to complete form.
4. Keep completed forms on file for FIT-KIDS data entry next year.
5. Race/ethnicity forms must be maintained in the child’s record a minimum three (3) years.
6. FIT Providers should allow parent/guardian to identify child’s ethnicity and race, unless not practicable or feasible.
7. Show the parent/guardian the form and the sub-groups under each category (such as “Chinese” or “Japanese” under the Asian racial category) – this will assist them in identifying the child’s race and ethnicity.
8. Parent/guardian first identifies whether child is of Hispanic/Latino ethnicity – this is a “Yes” or “No” question.
9. Parent/guardian then identifies child with one or more of the race category options – check all racial categories that the parent/guardian identifies.
10. If Native American is checked, the parent/guardian should have tribal affiliation for the child – however, the FIT Provider does not need to verify tribal affiliation!
11. Even if the FIT Provider feels that the parent/guardian has chosen a racial group incorrectly, the parent/guardian’s choices should be honored!
12. If race/ethnicity information is not provided by the parent/guardian, the FIT Provider should ensure that the non-response is a refusal, rather than an oversight.
13. If the information cannot be obtained after having been afforded ample opportunity, the FIT Provider should provide the ethnicity and/or race information through observer identification. Indicate how the ethnic and racial information was obtained at the bottom of the form.
14. Both Ethnicity (Hispanic/Latino “Yes” or “No”) and Race **MUST** be reported for each child!