

FIO-19 Voluntary Self-Identification of Disability

Purpose

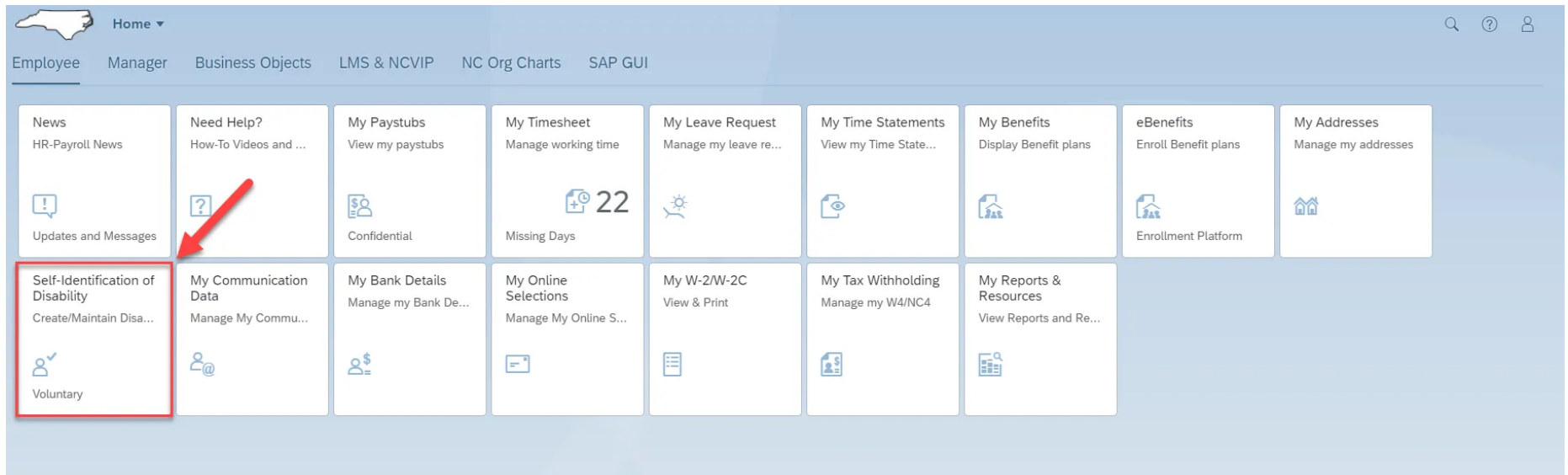
The purpose of this Business Process Procedure is to explain how to create and/or maintain your disability status within the Fiori Self-Identification of Disability application.

How to Create and/or Maintain Your Self-Identification of Disability

There are 5 steps to complete this process.

Step 1. Click on the **Self-Identification of Disability** tile to access the Voluntary Self-Identification of Disability app.

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Step 2. Review the “Why are you being asked to complete this form” and the “How do you know if you have a disability” sections.

Image



▼ Why are you being asked to complete this form?

We are a federal contractor or subcontractor. The law requires us to provide equal employment opportunity to qualified people with disabilities. We have a goal of having at least 7% of our workers as people with disabilities. The law says we must measure our progress towards this goal. To do this, we must ask applicants and employees if they have a disability or have ever had one. People can become disabled, so we need to ask this question at least every five years.

Completing this form is voluntary, and we hope that you will choose to do so. Your answer is confidential. No one who makes hiring decisions will see it. Your decision to complete the form and your answer will not harm you in any way. If you want to learn more about the law or this form, visit the U.S. Department of Labor's Office of Federal Contract Compliance Programs (OFCCP) website at www.dol.gov/ofccp.

▼ How do you know if you have a disability?

A disability is a condition that substantially limits one or more of your "major life activities." If you have or have ever had such a condition, you are a person with a disability. Disabilities include, but are not limited to:

Alcohol or other substance use disorder (not currently using drugs illegally)	Disfigurement, for example, disfigurement caused by burns, wounds, accidents, or congenital disorders	Nervous system condition, for example, migraine headaches, Parkinson's disease, multiple sclerosis (MS)
Autoimmune disorder, for example, lupus, fibromyalgia, rheumatoid arthritis, HIV/AIDS	Epilepsy or other seizure disorder	Neurodivergence, for example, attention-deficit/hyperactivity disorder (ADHD), autism spectrum disorder, dyslexia, dyspraxia, other learning disabilities
Blind or low vision	Gastrointestinal disorders, for example, Crohn's Disease, Irritable bowel syndrome	Partial or complete paralysis (any cause)
Cancer (past or present)	Intellectual or developmental disability	Pulmonary or respiratory conditions, for example, tuberculosis, asthma, emphysema
Cardiovascular or heart disease	Mental health conditions, for example, depression, bipolar disorder, anxiety disorder, schizophrenia, PTSD	Short stature (dwarfism)
Celiac disease	Missing limbs or partially missing limbs	Traumatic brain injury
Cerebral palsy	Mobility impairment, benefiting from the use of a wheelchair, scooter, walker, leg brace(s) and/or other supports	
Deaf or serious difficulty hearing		
Diabetes		

Step 3. Your current selected disability status will default. If you would like to change your disability status, click the appropriate **radio button** and then click **Submit**.

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✓ Please check one of the boxes below:

- ☒ Yes, I Have A Disability, Or Have A History/Record Of Having A Disability
- ☐ No, I Don't Have A Disability, Or A History/Record Of Having A Disability
- ☐ Don't Wish To Answer

Step 4. Once you click Submit, you will receive a **Disability response submitted** message. Your disability status can be updated/revised at any time.

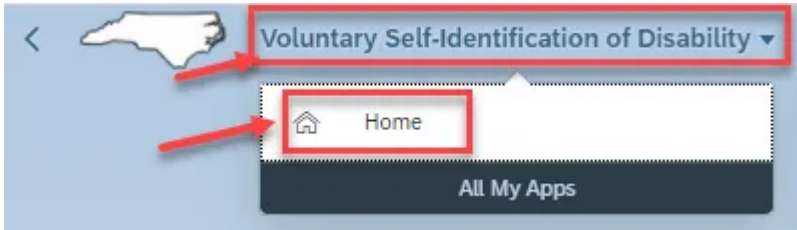
Image

✓ Please check one of the boxes below:

- ☒ Yes, I have a disability, or have had one in the past
- ☐ No, I do not have a disability and have not had one in the past
- ☐ I do not want to answer

Step 5. To go back to the Homepage click on **Voluntary Self-Identification of Disability** and then click on **Home**.

Image



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