

# Voluntary Affirmative Action and Veteran Status Data

## PLEASE NOTE: Completion of this form is voluntary.

We consider all applicants for positions without regard to race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran, or any other similarly protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria.

To comply with requirements regarding government recordkeeping, reporting, and other legal obligations that may apply, we request that you complete this form. Providing this information is **STRICTLY VOLUNTARY**. Not providing it will not subject you to any negative personnel decision or action. Your cooperation is appreciated.

**To be completed by applicant on a voluntary basis. Not for interview purposes. File separately from application.**

## Applicant Information

Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
LAST FIRST MIDDLE

Address \_\_\_\_\_  
STREET CITY STATE ZIP CODE

Male  Female Position applied for \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

### Referral source:

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Government employment agency | <input type="checkbox"/> Private employment agency | <input type="checkbox"/> Current employee |
| <input type="checkbox"/> Walk-in                      | <input type="checkbox"/> School                    | <input type="checkbox"/> Relative         |
| <input type="checkbox"/> Other _____                  | <input type="checkbox"/> Advertisement in _____    |   |

Person who referred you, if applicable \_\_\_\_\_

### Please select one of the following Equal Employment Opportunity Identification Groups:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Hispanic or Latino  | <input type="checkbox"/> White (not Hispanic or Latino)                  | <input type="checkbox"/> Asian (not Hispanic or Latino) |
| <input type="checkbox"/> Native Hawaiian/Other Pacific Islander (not Hispanic or Latino) | <input type="checkbox"/> Black/African American (not Hispanic or Latino) |   |
| <input type="checkbox"/> American Indian/Alaskan Native (not Hispanic or Latino)         | <input type="checkbox"/> Two or more races (not Hispanic or Latino)      |   |

### Veteran Status Information

This employer is a Government contractor subject to the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended by the Jobs for Veterans Act of 2002, 38 U.S.C. 4212 (VEVRAA), which requires government contractors to take affirmative action to employ and advance in employment: (1) disabled veterans; (2) recently separated veterans; (3) active-duty wartime or campaign-badge veterans; and (4) Armed Forces service medal veterans. These classifications are defined as follows:

- A "disabled veteran" is one of the following:
  - a veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans Affairs; or
  - a person who was discharged or released from active duty because of a service-connected disability.
- A "recently separated veteran" means any veteran during the three-year period beginning on the date of such veteran's discharge or release from active duty in the U.S. military, ground, naval, or air service.
- An "active-duty wartime or campaign-badge veteran" means a veteran who served on active duty in the U.S. military, ground, naval or air service during a war, or in a campaign or expedition for which a campaign badge has been authorized under the laws administered by the Department of Defense.
- An "Armed forces service medal veteran" means a veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985.

Protected veterans may have additional rights under USERRA — the Uniformed Services Employment and Reemployment Rights Act. In particular, if you were absent from employment in order to perform service in the uniformed service, you may be entitled to be reemployed by your employer in the position you would have obtained with reasonable certainty if not for the absence due to service. For more information, call the U.S. Department of Labor's Veterans Employment and Training Service (VETS), toll-free, at 1-866-4-USA-DOL.

(continued)

If you believe you belong to any of the categories of protected veterans listed on front page, please indicate by checking the appropriate box below. As a government contractor subject to VEVRAA, we request this information in order to measure the effectiveness of the outreach and positive recruitment efforts we undertake pursuant to VEVRAA.

I identify as one or more of the classifications of protected veteran listed above

I am not a protected veteran

Applicant's signature \_\_\_\_\_

**APPLICANT: Only complete this section if you have received an offer of employment.**

As a Government contractor subject to VEVRAA, we are required to submit a report to the United States Department of Labor each year identifying the number of our employees belonging to each specified "protected veteran" category. If you believe you belong to any of the categories of protected veterans listed above, please indicate by checking the appropriate box below.

I belong to the following classifications of protected veterans (choose all that apply):

Disabled veteran

Recently separated veteran

Active-duty wartime or campaign-badge veteran

Armed forces service medal veteran

**OR**

I am a protected veteran, but I choose not to self-identify the classifications to which I belong.

I am NOT a protected veteran.

If you are a disabled veteran it would assist us if you tell us whether there are accommodations we could make that would enable you to perform the essential functions of the job, including special equipment, changes in the physical layout of the job, changes in the way the job is customarily performed, provision of personal assistance services or other accommodations. This information will assist us in making reasonable accommodations for your disability.

Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information provided will be used only in ways that are not inconsistent with the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended.

The information you submit will be kept confidential, except that (i) supervisors and managers may be informed regarding restrictions on the work or duties of disabled veterans, and regarding necessary accommodations; (ii) first aid and safety personnel may be informed, when and to the extent appropriate, if you have a condition that might require emergency treatment; and (iii) government officials engaged in enforcing laws administered by the Office of Federal Contract Compliance Programs, or enforcing the Americans with Disabilities Act, may be informed.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**For Administrative Use**

**NOTE: Applicant must complete above section after a job offer has been made, but before beginning work.**

Position(s) applied for \_\_\_\_\_  Current opening  No current opening

Other position(s) considered for \_\_\_\_\_

Hired?  No  Yes Hire date \_\_\_\_/\_\_\_\_/\_\_\_\_ Position hired for \_\_\_\_\_

**Position classification**

Executive/senior-level officials and managers

Professionals

First/mid-level officials and managers

Administrative support workers

Service workers

Operatives

Craft workers

Sales workers

Technicians

Laborers and helpers

Additional notes \_\_\_\_\_

Completed by \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_



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