

Human Resource Services, Office of

2900 Bedford Ave. • Brooklyn, NY 11210 TEL 718-951-5377 • FAX 718-951-4859 www.brooklyn.cuny.edu

VETERAN SELF-IDENTIFICATION FORM

EMPLOYEE NAME:_____-___-

Please select one or more of the following:

- □ NOT a Veteran
- Armed Forces Service Medal Veteran: Any 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 (61FR 1209).
- Disabled Veteran: Either (1) 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 (2) a person who was discharged or released from active duty because of a service-connected disability.

Note: If you have a disability and need a reasonable accommodation to perform the essential functions of your job, please contact the Central Office Human Resources Director to begin an interactive discussion to identify and provide you a reasonable accommodation.

- □ Other Protected Veteran: 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; see http://www.opm.gov/staffingportal/vgmedal2.asp.
- □ **Recently Separated Veteran**: Any veteran during the three-year period beginning on the date of veteran's discharge or release from active duty in the U.S. Military, ground, naval or air service.

Discharge Date: _____

