INVITATION TO SELF-IDENTIFY AS A PROTECTED VETERAN
41 CFR 60-300

Fairleigh Dickinson University 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. Our Affirmative Action Plan is designed to set forth and measure the effectiveness of the outreach and positive recruitment efforts we undertake pursuant to VEVRAA. The classifications of protected veterans are defined as follows:

- A “disabled veteran” is: (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.

- 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. Go to http://www.opm.gov/staffingportal/vgmedal2.asp for a list.

- An “Armed Forces service medal veteran” means 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 (61 FR 1209). Go to http://www.opm.gov/staffingportal/vgmedal2.asp for a list.

If you believe you belong to any of the categories of protected veterans listed above, please indicate by checking all of the boxes below that apply. 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.
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I belong to the following classification(s) of protected veterans (choose all that apply):

[ ] Disabled Veteran (see below)

[ ] Recently Separated Veteran - Date of discharge ____________

[ ] Active Wartime or Campaign Badge Veteran - War/Campaign/Expedition ___________

[ ] Armed Forces Service Medal Veteran - Military Operation ____________

______________________________________________________________________

[ ] 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 following accommodation(s) would permit me to perform jobs utilizing my skills:

______________________________________________________________________

______________________________________________________________________

______________________________________________________________________

Name: _____________________________ Date: ____________

Signature: ___________________________