Veterans' Preference Form (ORS 408.230)

Veterans who meet the minimum qualifications for a position open for recruitment may be eligible for preference in employment under Oregon law. If you are a Qualified Veteran or Qualified Disabled Veteran and would like to be granted preference in the selection and hiring process for a specific posted job, please fill out this Veterans' Preference Form and provide proof of eligibility by submitting a copy of form DD-214 or 215 (copy 4). This completed form and required supporting documentation must be submitted with your application in order for consideration for Veterans' Preference.

Qualified Veteran Questions: Veterans' preference may be claimed if you check at least one of the boxes below and provide proof via form DD-214 or 215 (Copy 4)

| Position Applied For: | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|
| Signature: | Date: |
| I hereby claim Veterans' Preference, have attached proof of information is true and correct. I understand that any false standismissal, regardless of when discovered. | · · |
| I was awarded the Purple Heart for wounds received in o | combat. |
| I was discharged or released from active duty for a disab | pility incurred or aggravated in the line of duty; or |
| I am entitled to disability compensation under laws a Veterans Affairs; or | administered by the United States Department of |
| Qualified Disabled Veteran Questions: Additional preference below and provide proof of eligibility via a copy of DD214 or letter from the United States Department of Veteran's Affairs | r 15, Copy 4, and a public employment preference |
| And am receiving a nonservice – connected pension from | n the United States Department of Veterans Affairs |
| And received a combat or campaign ribbon or an expect the United States and was discharged or released from | • |
| For at least one day in a combat zone and was dischar conditions | rged or released from active duty under honorable |
| For a period of 178 days or less and was discharged or re and have a disability rating from the United States Depart | • |
| For a period of 178 days or less and was discharged or re because of a service due to a service related disability | leased from active duty under honorable conditions |
| For a period of more than 178 consecutive days beginn released from active duty under honorable conditions | ing after January 31, 1955, and was discharged or |
| For a period of more than 90 consecutive days beginning or released under honorable conditions | on or before January 31, 1955, and was discharged |
| ORS 408.225(f) – I served on active duty with the Armed Fo | rces of the United States: |

This form and supporting documentation must be received by the City of Harrisburg no later than the closing time and date of the job posting. If you have any specific questions please contact Lori Ross.