

Veterans' Preference Form

City of Lowell 107 E. 3rd Street PO Box 490 Lowell, OR, 97452 Fax: 541-937-2157

Annou	nouncement # Title of Position	
Print 1	nt Name	
may be checkle utilize	der Oregon law ORS 408.235-408.238, veterans who meet minimum qual be eligible for employment preference. If you think you may qualify, placklist carefully. Check the box for each item that is appropriate. (Please rate a points system, you may be eligible for either 10 points as a qualified that as a qualified veteran, but not both, based on a 100-point scale.)	ease read the following note: for departments that
	s completed form and required documentation must be submitted to the C submit your employment application.	City of Lowell at the time
and pro	lified Veteran Questions: You may claim veterans' preference if you chec provide proof of eligibility by submitting a copy of your DD-214 or DD harge status, e.g. honorable discharge. Check the applicable box below:	
Cli	Check the applicable box below:	
	☐ I served on active duty with the Armed Forces of the United States for 90 consecutive days beginning on or before January 31, 1955, and w under honorable conditions; or	-
	☐ I served on active duty with the Armed Forces of the United States f 178 consecutive days beginning after January 31, 1955, and was disc active duty under honorable conditions; or	*
	☐ I served on active duty with the Armed Forces of the United States for discharged or released from active duty under honorable conditions be connected disability; or	<u> </u>
	☐ I served on active duty with the Armed Forces of the United States for discharged or released from active duty under honorable conditions from the United States Department of Veterans Affairs; or	
	☐ I served on active duty with the Armed Forces of the United States for combat zone and was discharged or released from active duty under l	
	☐ I received a combat or campaign ribbon or an expeditionary medal for Forces of the United States and was discharged or released from active conditions; or	

 I am receiving a nonservice-connected pension Affairs. 	from the United States Department of Veterans	
Active duty does not include attendance at a schoo to an active enlistment or regular tour of duty, or n member of an organized reserve or a National Gua	ormal military training as a reserve officer or	
Qualified Disabled Veteran Questions: You may claim of least one box below and provide proof of eligibility by	<u> </u>	
1. a copy of your <u>DD-214 or DD-215 form showi</u>	ng your discharge status, and	
2. a copy of your veterans' disability preference letter stating your disability and dated within the last six months of the date of this application from the Department of Veterans' Administration.		
Check the applicable box below:		
☐ I am entitled to disability compensation under Department of Veterans' Affairs; OR	laws administered by the United States	
☐ I was discharged or released from active duty f duty; OR	or a disability incurred or aggravated in the line of	
☐ I was awarded the Purple Heart for wounds rec	reived in combat.	
Signature Section: This section must be completed by a	all applicants utilizing this form.	
I hereby claim veterans' preference and certify that the understand that any false statements may be cause for when discovered.		
Print Name		
Signature of Applicant	Date	

Preference will not be awarded without the appropriate documentation. You must submit a copy of your DD-214 or DD-215 that shows discharge status in all cases, even if you have previously submitted a copy to the City. If you are claiming disabled veteran preference, you must also submit a copy of your veterans' disability preference letter stating your disability from the Department of Veterans' Administration. You may not receive preference without these accompanying documents.