SAO Trust VETS100 Form

SAO, as a federal contractor, is required by law to collect and provide annually to the Department of Labor information regarding employees who hold veteran status in specific categories.* The information is provided via the VETS-100 Report. Your response to the questions below is required in order to meet this reporting requirement.

Name:Pos		tion Title:	
Series/grade:			
1.	1. Have you ever served in a branch of the Unit	red States Armed Forces?	
	☐ Yes (Proceed to Question 2) ☐ No (Skip to Signature/Date.)		
2.	2. Please indicate which of the following defini	tions your military service meets. (Check all that apply.)	
	Disabled Veteran: 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.		
		served on active duty in the U.S. military, ground, naval or expedition for which a campaign badge has been	
		veteran who, while serving on active duty in the U.S. pated in a United States military operation for which an ursuant to Executive Order 12985.	
		uring the three-year period beginning on the date of such uty in the U.S. military, ground, naval or air service.	
	Covered Veteran: a veteran, as defined in	the four veteran categories above.	
	☐ None of the above.		
c:		ъ.	
Signature:		Date:	

* Title 38, United States Code, Section 4212(d) and PL 105-339

Form SAO VETS100; 02/2012