VETERANS' PREFERENCE CERTIFICATION

Name:

Date: _____

Section 295.07(1), Florida Statutes, provides for Veterans' Preference in employment appointment and retention, if qualified under one of the following categories and not exempt under Section 295.07(4), Florida Statutes. Section 295.09, Florida Statutes, also provides Veterans' Preference for reinstatement, reemployment, and promotion. If you seek Veterans' Preference, please "check" the appropriate box, and provide this form and documentation of your status along with your employment application, no later than the position advertisement closing date.

I certify that I am qualified to claim Veterans' Preference under the category checked below:

 \square (a) A disabled veteran:

1. Who has served on active duty in any branch of the United States Armed Forces, has received an honorable discharge, and has established the present existence of a service-connected disability that is compensable under public laws administered by the United States Department of Veterans Affairs; or

2. Who is receiving compensation, disability retirement benefits, or pension by reason of public laws administered by the United States Department of Veterans Affairs and the United States Department of Defense.

(b) The spouse of a person who has a total disability, permanent in nature, resulting from a service-connected disability and who, because of this disability, cannot qualify for employment, and the spouse of a person missing in action, captured in line of duty by a hostile force, or forcibly detained or interned in line of duty by a foreign government or power.

(c)	А	wartime	veteran	as defin	ned in s.	1.01(14),	who h	as serve	d at	least 1	day	during	a wartime	period.	I
acknowl	edge	e that act	tive duty	for train	ing may	not be all	owed fo	or eligibi	lity ı	under th	nis pa	ragraph.			

(d) The unremarried widow or widower of a veteran who died of a service-connected disability.

(e)	The r	nother,	father,	legal	guard	lian, o	r unrei	narried	widow	or widow	er of	a membe	r of the	United	States
										condition					
Departr	nent of	Defense	e.												

(f) A veteran as defined in s. 1.01(14), F.S. I acknowledge that active duty for training may not be allowed for eligibility under this paragraph.

(g) A current member of any reserve component of the United States Armed Forces or the Florida National Guard. If so, please attach FDVA form VP2, signed by your immediate military supervisor, to document your status.

Please submit this certification with your application, or as soon as possible, prior to the date that the position advertisement closes. In order to receive Veterans' Preference and to complete your application, this form and documentation to prove your status must be returned to the Human Resources ("HR") office in accordance with Rule 55A-7.013, Florida Administrative Code. Please contact HR at ______@_____ or ______, if you have any questions.

This statement is true to the best of my knowledge and belief.

By_____

Printed Name _____