

**OKLAHOMA STATE UNIVERSITY
INVITATION TO SELF-IDENTIFY FOR INDIVIDUALS WITH DISABILITIES,
VIETNAM ERA VETERANS AND OTHER VETERANS**

OSU is a government contractor subject to Section 503 of the Rehabilitation Act of 1973, as amended, and the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended, and the Veterans Employment Opportunities Act of 1998. These Acts require government contractors to take affirmative action to employ and advance in employment qualified individuals with disabilities, special disabled veterans, veterans of the Vietnam era and other veterans who served on active duty during a war or in a campaign or expedition for which a campaign badge has been authorized. If you have a disability, are a special disabled veteran, veteran of the Vietnam era, or other veteran who served on active duty during a war or in a campaign or expedition for which a campaign badge has been authorized, and would like to be considered under the affirmative action program, please complete this form and return to the Director of Affirmative Action, 408 Whitehurst. **YOU MAY INFORM US OF YOUR DESIRE TO BENEFIT UNDER THE PROGRAM AT THIS TIME AND/OR AT ANY TIME IN THE FUTURE.** This information will assist us in making accommodations if you are an individual with a disability.

Submission of this information is voluntary. Refusal to provide it will not subject you to any adverse treatment. Information you submit will be kept confidential, except that: (i) supervisors and managers may be informed regarding restrictions on the work or duties of individuals with disabilities, and regarding necessary accommodations; (ii) first aid and safety personnel may be informed, when and to the extent appropriate, if the condition might require emergency treatment; and (iii) government officials engaged in enforcing laws administered by the Office of Federal Contract and Compliance Programs or the Americans with Disabilities Act, may be informed. The information provided will be used only in ways that are consistent with Section 503 of the Rehabilitation Act of 1973, as amended, the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended, and the Veterans Employment Opportunities Act of 1998.

If you are an individual with a disability, special disabled veteran, veteran of the Vietnam era, or a veteran who served on active duty during a war or in a campaign or expedition for which a campaign badge has been authorized, we would like to include you under the affirmative action program. If you are an individual with a disability it would assist us if you tell us about (i) any special methods, skills, and procedures which qualify you for positions that you might not otherwise be able to do because of your disability so that you will be considered for any positions of that kind, and (ii) the accommodations which we could make which would enable you to perform the job properly and safely, including special equipment, changes in the physical layout of the job, elimination of certain duties relating to the job, provision of personal assistance services or other accommodations.

1 Vietnam - Era Active duty, military service in the US Military, for a period of more than 180 days, and were discharged or released with other than a dishonorable discharge, if any part of such active duty occurred: (I) in the Republic of Vietnam between February 28, 1961, and May 7, 1975; or (II) between August 5, 1964 and May 7, 1975 in all other cases; or were discharged or released from active duty for a service connected disability if any part of such active duty was performed: (I) in the Republic of Vietnam between February 28, 1961, and May 7, 1975; or (II) between August 5, 1964, and May 7, 1975, in all other cases.

2 Special Disabled + Vietnam Era A Vietnam Era veteran plus (1) Entitled to compensation (or would be if not receiving military retired pay would be entitled to compensation) under laws administered by the Department of Veterans Affairs for a disability (i) rated at 30 percent or more, or (ii) rated at 10 or 20 percent if it has been determined that the individual has a serious employment disability; (iii) were discharged or released from active duty because of a service-connected disability or discharged or released from active duty because of a service-connected disability.

3 Other Eligible/Protected Veteran - Served in the military, ground, naval or air service of the United States on active duty during a war or in a campaign or expedition for which a campaign badge has been authorized. A complete list of campaigns can be viewed at <http://www.opm.gov/veterans/html/vgmedal2.htm>

4 Special Disabled + Other Eligible/Protected Veteran – Other eligible/protected veteran plus entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Department of Veterans Affairs for a disability (i) rated at 30 percent or more, or (ii) rated at 10 or 20 percent and have a serious employment disability; or you were discharged or released from active duty because of a service-connected disability.

5 Other Eligible/Protected Veteran + Vietnam-Era - A Vietnam Era Veteran and an other eligible/protected veteran

6. Special Disabled Veteran - You are **not a Vietnam Era or Other Eligible/Protected Veteran**, but you are (1) a veteran 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 Department of Veterans Affairs for a disability (i) rated at 30 percent or more, or (ii) rated at 10 or 20 percent if it has been determined that the individual has a serious employment disability; or a person who was discharged or released from active duty because of a service-connected disability or a veteran who was discharged or released from active duty because of a service-connected disability.

7. Special Disabled + Vietnam Era + Other Eligible/Protected Veteran - Your military service includes active duty during a war or in a campaign or expedition for which a campaign badge was authorized as well as during the dates specified for the Vietnam Era Veteran and you are entitled to compensation based on a disability rated at 30 percent or more, or rated at 10 or 20 percent if it has been determined that you have a serious employment disability, or if you were discharged or released from active duty because of a service-connected disability.

8. Non Vets100 Veteran - You have served in the US military but can not be classified into any of the categories listed above.

CAMPUS WIDE ID #	NAME (Print Last, First, Middle Initial)
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DISABILITY STATUS (Check those applicable)	<input type="checkbox"/> 01 Wheelchair assisted	<input type="checkbox"/> 04 Blind/visually impaired	<input type="checkbox"/> 06 Speech
<input type="checkbox"/> 02 Other mobility impairment	<input type="checkbox"/> 05 Deaf/hearing impaired	<input type="checkbox"/> 03 Coordination	<input type="checkbox"/> 07 Learning
<input type="checkbox"/> 08 Mental/psychological	<input type="checkbox"/> 09 Other		

VETERAN STATUS	Retirement/Release for Active Duty/Discharge Date: _____	
(Check only one – See Reverse for information about the categories.)		
<input type="checkbox"/> 01 Vietnam Era	<input type="checkbox"/> 02 Special Disabled + Vietnam Era	<input type="checkbox"/> 03 Other Veteran
<input type="checkbox"/> 04 Special Disabled + Other Veteran	<input type="checkbox"/> 05 Other Eligible + Vietnam Era	<input type="checkbox"/> 06 Special Disabled
<input type="checkbox"/> 07 Special Disabled + Vietnam Era + Other Eligible	<input type="checkbox"/> 08 Non-Vets100 Veteran	

In addition, if you are an individual with a disability please tell us about any special requirements by answering the following, if appropriate:

1. Is any accommodation currently being made by OSU (including provision of special equipment, changes in physical access or modification of work schedule or duties) in order to accommodate your disability? If yes, describe.

2. Describe the accommodations we could make that would enable you to perform your job safely and properly:

EMPLOYMENT STATUS (Check one)	Employment Start Date: _____	
<input type="checkbox"/> Full-time Continuous	<input type="checkbox"/> Part-time Continuous	<input type="checkbox"/> Full-time Temporary
<input type="checkbox"/> Part-time Temporary	<input type="checkbox"/> Student Employee	

Signature: _____	Department: _____
Date: _____	Campus Telephone Number: _____