Instructions for filing claims under the Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA) and/or the Veterans' Preference (VP) provisions of the Veterans Employment Opportunities Act of 1998

Section I

Questions 1-7 - Self-explanatory. (**Note:** Social Security number is optional, but desired; or, you may instead just give "000-00-" and then the last four digits of your Social Security number.)

Section II

For this section please use the branch of service that you were, are or will be in when the allegations that lead you to file this claim occurred. For each question, answer to the best of your ability only the questions that apply to you. This information must eventually be supported with documentation in order for the Veterans' Employment and Training Service (VETS) to establish your eligibility under the law.

- Question 8 Mark the appropriate box to indicate the branch of service you that you are, have been, or will be a member of. (May skip if filing a VP claim).
- Question 9 Fill in the specific information you have of your unit including name, address and phone number.
- Question 10
 - a. Fill in the dates that you served in, the date that you began your service, the date that you will begin your service. OR
 - b. Fill in the date of examination/rejection for service.
- Question 11 Mark the appropriate box that best describes how you were discharged or separated. (If you have not yet been discharged, mark "Not Applicable.")

Section III

Please report the information of the employer(s) that your claim involves as accurately as possible. This information will be used to establish a point of contact within the company or agency.

- **Question 12** Fill in the name of your employer or the employer that you applied for a position with.
- Question 13 Fill in the employer's or potential employer's mailing address.
- Question 14
 - a. Fill in the name and, if possible the title of the person you are or have been in contact with regarding the position employed or applied for. (Often a human resource specialist or supervisor.)
 - b. Fill in their phone number.
- Question 15 Fill in the dates that you have been employed with this employer; or, if still employed there, fill in just the "From" date that you started working for this employer; or, if you have not yet started working there, fill in just the "From" date that you will start working for this employer.
- Question 16 (USERRA only) Mark the "no" box if you have not exceeded five cumulative years of uniformed service since beginning work with this employer. Mark the "yes" box if you have exceeded five cumulative years of uniformed service since beginning work with this employer and explain in the "Comments" section below.
- Question 17 Fill in the name of any Union(s) that may represent you. (May leave this question blank if filing a VP claim)
- Question 18 Fill in the title of the position you have now, or that you previously had, or that you applied for, with this employer.

Section IV

• Question 19 – (USERRA only) Indicate if the Employer Support of the Guard and Reserve (ESGR) was involved in handling your complaint before filing this Form 1010 claim with VETS.

Use Question #20 and/or #21 in this section to identify the program(s) for which you are filing this claim. (NOTE: Most claims – but not all – apply to only one program.) To complete Question #20 and/or #21, please fill in the issue that best describes your claim.

- For this claim to apply only to <u>Veterans' Preference (VP) in **Federal Employment**</u>: Complete Question #20, and skip #21.
- For this claim to apply only to <u>USERRA</u>: Skip **#20** and complete **#21**.
- For this claim to apply to both VP and USERRA: Complete both #20 and #21.

If Claim Concerns Hiring, RIF, Promotion or Termination

- Question 22 Fill in the title of the position that relates to this claim.
- Question 23 (USERRA only) Fill in the rate of pay for the position that relates to this claim.
- Question 24 (USERRA only) Fill in the date you applied for the position or promotion that relates to this claim.
 - a. Fill in the Vacancy Announcement Number.
 - b. Fill in the date the vacancy opened.
 - c. Fill in the date the vacancy closed.

If Claim Concerns Reemployment Following Service

- Question 25 (USERRA only) Fill in yes if you provided notice of your service to your employer before you began your military service. If not, mark "no" and explain in the "Comments" section and continue to question 28.
- **Question 26** (USERRA only)
 - a. Mark the "self" box if you provided the notice or the name of the person that provided the notice to your employer on your behalf.
 - b. Indicate how the notice was given and mark the appropriate box or boxes.
 - c. Fill in the date that the notice of service was provided to the employer.
- Question 27 (USERRA only) Fill in the name and title of the person to whom you provided the notice of service.
- Question 28 (USERRA only) Fill in the date you applied for reemployment or the date you returned to work.
- Question 29 Fill in the name and title of the person to whom you applied for reemployment.
- **Question 30** If you have been reemployed or reinstated, mark the "yes" box and enter the date that you were reemployed or have been reinstated with your employer and complete 30 (a). If you have not been reemployed or reinstated, mark the "no" box, skip 30 (a) and complete 30 (b) and (c).
 - a. Fill in your position and pay rate.
 - b. Fill in the date that your reemployment was denied and state the reason that was given. (If additional space is needed, you may explain in "Comments" section).
 - $c. \ \ Fill \ in the \ name \ and \ title \ of \ the \ individual \ within \ your \ employer \ who \ denied \ your \ reemployment.$

Comments

Please explain in detail and be sure to include any relevant facts as to why you are filing this claim. Please be sure to also explain in detail what remedies (for example: employment, reemployment rights, lost wages, seniority benefits, etc.) you seek by filing this claim.