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# HIREVets.gov

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# 2019 HIRE Vets Application

**ABOUT** 

Small Employer, Platinum Medallion

**Instructions** 

**Employer Identity** 

**Employer Address** 

**Employer Size** 

Please note that this form includes accompanying instructions for the Small Employer Platinum Award that explain how to fill out this form. These instructions include important information, such as definitions and rules, for determining whether an employer has met the medallion criteria. You must read the instructions for the Small Employer Platinum Award prior to completing and submitting the application.

OMB Burden Statement: Persons are not required to respond to this collection of information unless it displays a currently valid OMB number. Obligation to respond is required to obtain or retain benefits under the Honoring Investments in Recruiting and Employing American Military Veterans Act. The 5.75 hour public reporting burden for this collection of information, which is to apply for an award showcasing excellence in hiring and retaining veterans, includes time to review instructions, search existing data sources, gather and maintain the data needed, and complete and review the collection of information. Send comments regarding this burden estimate, or any other aspect of this collection, including suggestions for reducing burden, to the U.S. Department of Labor, Veterans' Employment and Training Service, Room S-1212, 200 Constitution Avenue, NW, Washington, DC 20210.

If you need assistance please see our FAQ page 2

#### **CONTINUE**







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# 2019 HIRE Vets Application

**ABOUT** 

Small Employer, Platinum Medallion

**Employer Identity** Instructions

**Employer Address** 

**Employer Size** 

**5** 

#### **Item 1** Employer Name (\*Required)

Enter the exact employer name assigned the Employer Identification Number (EIN) listed in Item 2.

Item 2 Enter the employer EIN

Do not enter your SSN on this line.

7

Item 3 Data Universal Number System (DUNS) Number

Enter the DUNS number if one exists.

**Item 4** Employer Doing Business As (DBA) Name

If the employer utilizes a DBA, enter it here.

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Item 5 Employer Street Address (*Required)  Enter the official address (number, street, and room or suite number, as applicable, of employer's principal office or place of business) for the employer listed in Item 1.  Item 6 Employer City or Town (*Required)  Enter the city or town.	f the
Enter the official address (number, street, and room or suite number, as applicable, of employer's principal office or place of business) for the employer listed in Item 1.  Item 6 Employer City or Town (*Required)	
employer's principal office or place of business) for the employer listed in Item 1.  Item 6 Employer City or Town (*Required)	
Enter the city or town.	
Enter the city or town.	
Item 7 Employer State or Province (*Required)  Item 8 ZIP Code or Postal (*Required)	Code
SELECT ONE	
Enter the State or province. 12 Enter the ZIP code or postal	code.
Item 9: Country (*Required)	
UNITED STATES	







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# 2019 HIRE Vets Application

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**Employer Identity** 

**Employer Address** 

**Employer Size** 

**Item 10** Employer Size: Did you have 50 or less employees as of December 31 of 2018 (the year prior to the year in which you are submitting the application)? If the answer to this question is "No" you are submitting the wrong form.



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For the purposes of this item, "employees" includes both veteran and non-veteran employees, as well as permanent full-time and permanent part-time employees. "Employees" does not include temporary workers. For additional information about the definitions of employee, temporary worker, and veteran, please see the instructions (\*Required)



Yes 16 If No, return to your Dashboard, delete this application and begin a new one for the correct size.

**Item 11** Medallion Level: Are you applying for the platinum level? (\*Required)



If No, return to your Dashboard, delete this application and begin a new one for the correct level

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# 2019 HIRE Vets Application

Small Employer, Platinum Medallion

Criteria

Please refer to the definitions of employee, temporary worker, and veteran in the instructions when completing Section B.

1

To qualify for the Small Employer Platinum Award, the employer must fill out and satisfy either the hiring requirement OR the retention AND employee veteran percentage requirements as well as all the other criteria. (\*Required)

HIRING: 10% Requirement

Item 12 Enter the number of veterans hired in 2018 (the preceding calendar year (CY)).

19

**Item 13** Enter the total number of employees (including veterans) hired in 2018 (the preceding CY).

20

Item 14 The veteran hiring percentage in 2018 (the preceding CY) was...

Item 12 divided by Item 13. Item 14 must be not less than 10% for the applicant to qualify for the Small Employer Platinum Award.

\_\_\_\_\_\_0.0%

OR

# RETENTION: 85% Requirement

**Item 15** Enter the number of veterans hired in 2017 (the CY preceding the preceding CY).

22

**Item 16** Enter the number of veterans hired in 2017 (the CY preceding the preceding CY) who remained with the employer for at least 12 months.

23

**Item 17** The percentage of veterans retained for 12 months was...

Item 16 divided by Item 15. Item 17 must be not less than 75% for the applicant to qualify for the Small Employer Platinum Award.

0.0%

AND

## VETERAN EMPLOYEE PERCENTAGE: 10% Requirement

**Item 18** Enter the total number of veterans employed on December 31st of 2018 (the preceding CY).

56

**Item 19** Enter the total number of employees (including veterans) with the company on December 31st of 2018 (the preceding CY).

57

**Item 20** The proportion of veteran employees is...

Item 18 divided by Item 19. Item 20 must be not less than 10% for the applicant to qualify for the Small Employer Platinum Award.

43

0.0%

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# 2019 HIRE Vets Application

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Small Employer, Platinum Medallion

Employer Programs Community

In order to qualify for the Small Employer Platinum Award, an applicant must satisfy only TWO of the following five criteria (Items 21-25). Only fill out TWO of the items. (\*Required) 52

**Item 21** Briefly describe your employee veteran organization or resource group. Your employee veteran organization or resource group must assist new veteran employees with integration, including coaching and mentoring. See Item 21 in the instructions for additional guidance about employee veteranorganization or resource group criterion requirements.

i



(1,000 character limit)

**Item 22** Briefly describe the programs you have established to enhance the leadership skills of veteran employees during their employment. See Item 22 in the instructions for additional guidance about leadership program criterion requirements.



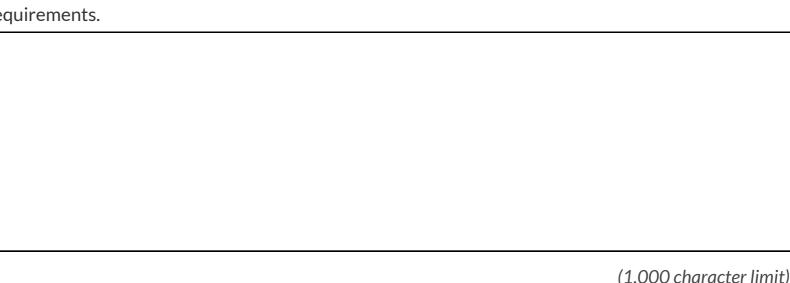


(1,000 character limit)

**Item 23** Briefly describe the human resources veterans' initiative you have established. See Item 23 in the instructions for additional guidance about human resources veterans' initiative criterion requirements.







(1,000 character limit)

**Item 24** Briefly describe how the employer provides each of its employees serving on active duty in the United States National Guard or Reserve with compensation sufficient, in combination with the employee's active duty pay, to achieve a combined level of income commensurate with the employee's salary prior to undertaking active duty. See Item 24 in the instructions for additional guidance about pay differential criterion requirements.





dance about pay differential criterion requirements.

(1,000 character limit)

**Item 25** Briefly describe the employer's tuition assistance program to support veteran employees' attendance in post-secondary education during the term of their employment. See Item 25 in the instructions for additional guidance about tuition assistance criterion requirements.





(1,000 character limit)

ВАСК

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# 2019 HIRE Vets Application

**ABOUT** 

Small Employer, Platinum Medallion

**Employer Programs** 

**Community** 

**Item 26 (OPTIONAL)** Briefly describe any employer efforts to support the veteran and military community that fall outside of the criteria but may serve as models of support for veterans and their families. This may include efforts such as veteran/military spouse recruitment and employment. This will not factor into whether an employer receives an award.

•		
(4.000		
(1,000 character limit)		

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# 2019 HIRE Vets Application

**ABOUT** 

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#### **Labor Law Violations**

**Item 27** As further explained in Item 27 of the instructions, the employer has not had an adverse labor law decision, stipulated agreement, contract debarment, or contract termination pursuant to USERRA or VEVRAA. By selecting the "I Agree" button below, you certify that the above statement is true. (\*Required)





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I agree

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<Employer Name:>

#####

<Country>

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I agree

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# 2019 HIRE Vets Application Small Employer, Platinum Medallion

**Review and Attestation** 

### **Review** Please review the information below to ensure it is accurate.

Item 8

Item 9

Country

**B. Veteran Employee Criteria** 

### A. Employer Information Item 1 **Employer Name**

	Zimproyer rearrie	Zimpie, et i tame.
Item 2	Employer EIN	##-###### 58
Item 3	Data Universal Number System (DUNS) Number	############
Item 4	Employer Doing Business As (DBA) Name	N/A
Item 5	Employer Street Address	<employer address="" street=""></employer>
Item 6	Employer City or Town	<employer city="" or="" town=""></employer>
Item 7	Employer State or Province	<state></state>

#### **Item 10** Employer Size Yes - Small Yes - Platinum **Item 11** Medallion Level: Platinum

**Item 12** Enter the number of veterans hired in 2018 (the

Employer ZIP Code or Postal Code

preceding calendar year (CY)). **Item 13** Enter the total number of employees (including ######## veterans) hired in 2018 (the preceding CY).

preceding CY) was...

**Item 22** Briefly describe the programs you have

**Item 14** The veteran hiring percentage in 2018 (the

## **Item 21** Briefly describe your employee veteran

C. Integration Assistance Criteria

organization or resource group. Your employee veteran organization or resource group must assist new veteran employees with integration, including coaching and mentoring. See Item 21 in the instructions for additional guidance about employee veteranorganization or resource group criterion requirements.

established to enhance the leadership skills of veteran employees during their employment. See Item 22 in the instructions for additional guidance about leadership program criterion requirements.

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Lorem ipsum dolor sit amet, consectetur

adipiscing elit. Quisque ullamcorper

viverra aliquet.

### **Item 27** As further explained in Item 27 of the instructions, the employer has not had an

D. Labor Law Violations

agreement, contract debarment, or contract

By selecting the "I Agree" button below, you

certify that the above statement is true.

termination pursuant to USERRA or VEVRAA.

adverse labor law decision, stipulated



**Attestation Information** 

**Item 28** First and Last Name (\*Required)

For Items 28-29, provide information for the person attesting to Item 32.

Select the relevant title for the person attesting to Item 32.

**Item 29** Title (\*Required)

Item 30 Contact Email Address (\*Required)

**Item 31** Contact Phone Number (\*Required) 40

**Item 32** Attestation (\*Required) I declare under penalty of perjury under the laws of the United States of America that:

1. I am the Chief Executive Officer or the Chief Human Relations Officer of this employer submitting this application (hereinafter "the Employer"), or an equivalent official (someone with equivalent responsibilities and duties, such as the owner of a small firm) of the Employer;

2. The Employer has met all necessary award criteria;

3. I have read and reviewed this application and the information contained therein is true and accurate; and

supplement thereto or to aid, abet, or counsel another to do so is a violation of Federal law under 18 U.S.C. 1001.

4. I understand that to knowingly furnish false information in the preparation of this form and any

signing the above attestation under penalty of perjury. I agree

Entering your name in Item 28 above and then clicking on the "I agree" button below constitutes your

## **Item 33** Application Fee Payment (\*Required) The application fee is posted at https://www.hirevets.gov. By selecting the "I understand" button

below, you acknowledge understanding that your application will not be processed until the application fee payment is received, and that your application will not be processed if the fee is received after the end of the application period.

**I** understand

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# 2019 HIRE Vets Application

Small Employer, Platinum Medallion

✓ Your application has been submitted.

## **Pay Application Fee**

The application fee for your application *must* be paid before it can be processed by VETS.

1 Note: Payment must be submitted by April 30th and completed no later than May 31st

## **Identify Payment Maker**

Identify whether you or another individual from your organization will be making the application fee payment for your organization's HIRE Vets Medallion Program Award Application.

I am making the payment

Someone else is making the payment







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# Make Payment

## Pay Application Fee on Pay.gov Not paying on Pay.gov?

If someone else from your organization will be making the Application Fee payment on Pay.gov, please provide them with the following link and Application ID so that they can make the application fee payment:

Payment URL: <a href="https://www.pay.gov/addurlhere">https://www.pay.gov/addurlhere</a>

You can copy and paste your Application ID directly from this page to the Payment Form in Pay.gov.

Note that it may take up to 1-3 business days for your payment to be reflected on your HIRE Vets Medallion Application dashboard

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	HIREVets.gov
	HIRE Vets Medallion Payment Form
	Use this form to pay the HIRE Vets Medallion Small Employer Application Fee. Please fill in the information below completely and then click "Continue" to make your \$90.00 payment.
	1. Application ID Information
enter your Application ID nere on the Pay.gov form	Your Application ID will have been provided by the HIRE Vets Medallion Account Holder, or if you are the account holder, you can copy and paste the Application ID directly from the Dashboard page into this payment form.  HIRE Vets Application ID:  2. Payer / Account Holder Information  Please enter the information below for the payer / account holder of the referenced HIRE Vets Application.
	First Name: Last Name:
	Employer Name:
	Email Address:
	Phone Number:







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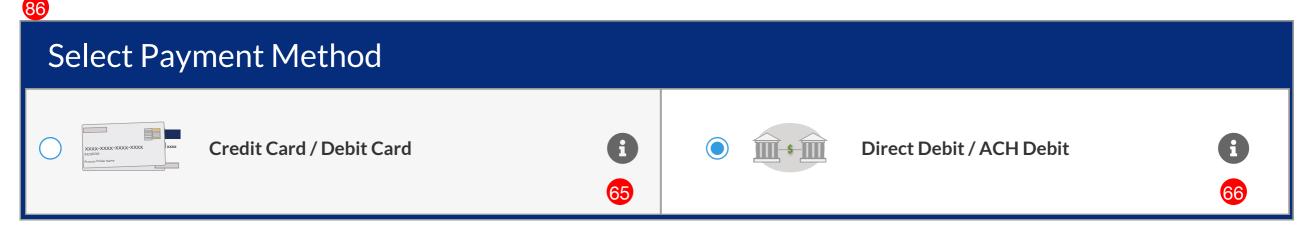
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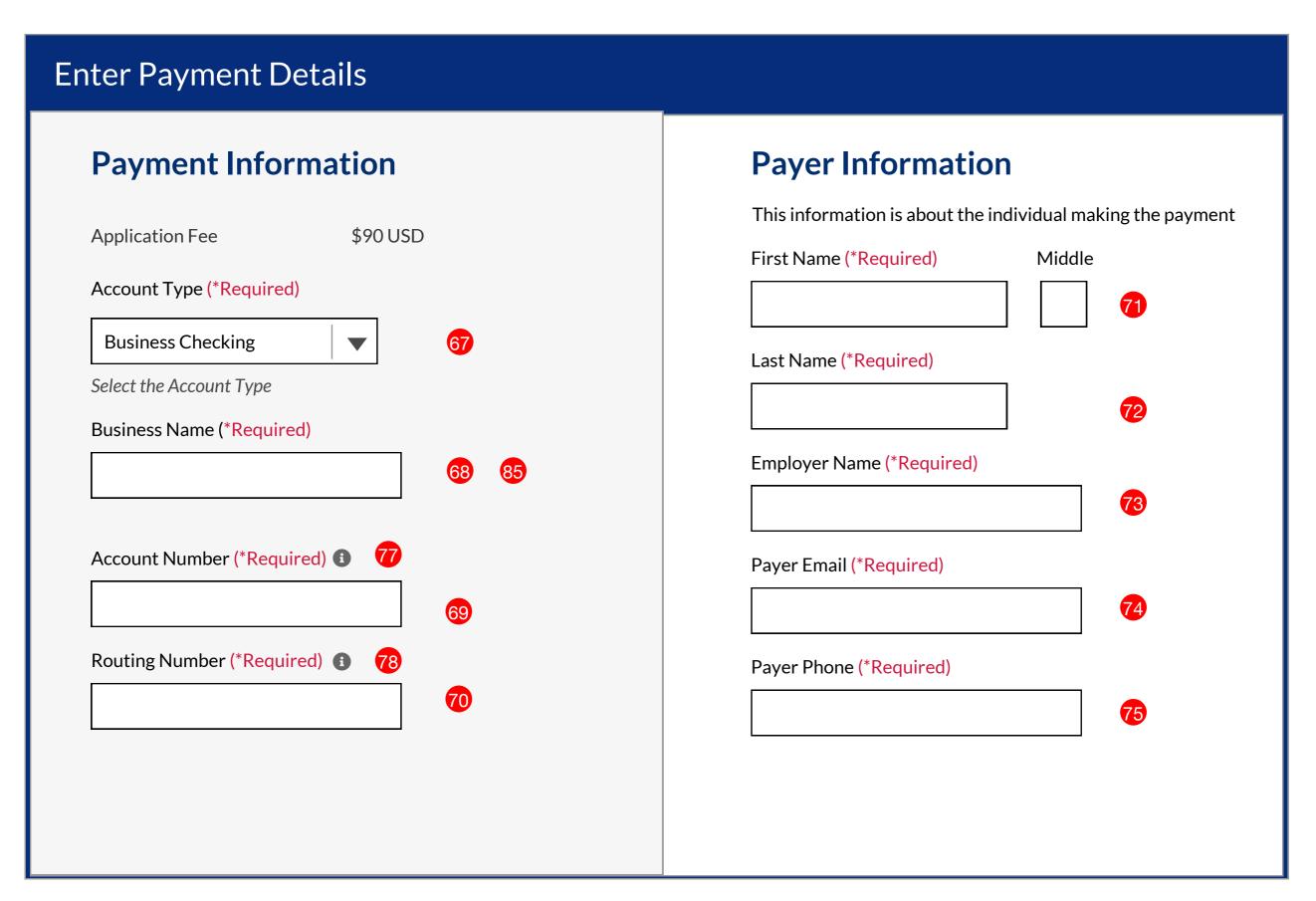
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# Make Payment

HIREVets.gov

We use industry-standard encryption to protect the confidentiality of your personal information. Your payment will be submitted through Pay.gov, a U.S. Government payment service.





• Note: Payments may take 1-3 business days to process before your updated payment status is reflected on your Hirevets.gov dashboard

I understand that I am authorizing a charge to the above account for this Application Fee, which covers the cost of processing my application and is non-refundable.



Submit





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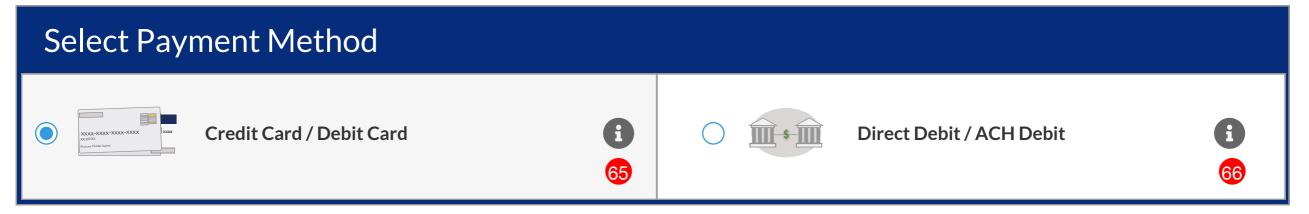
Return to Dashboard

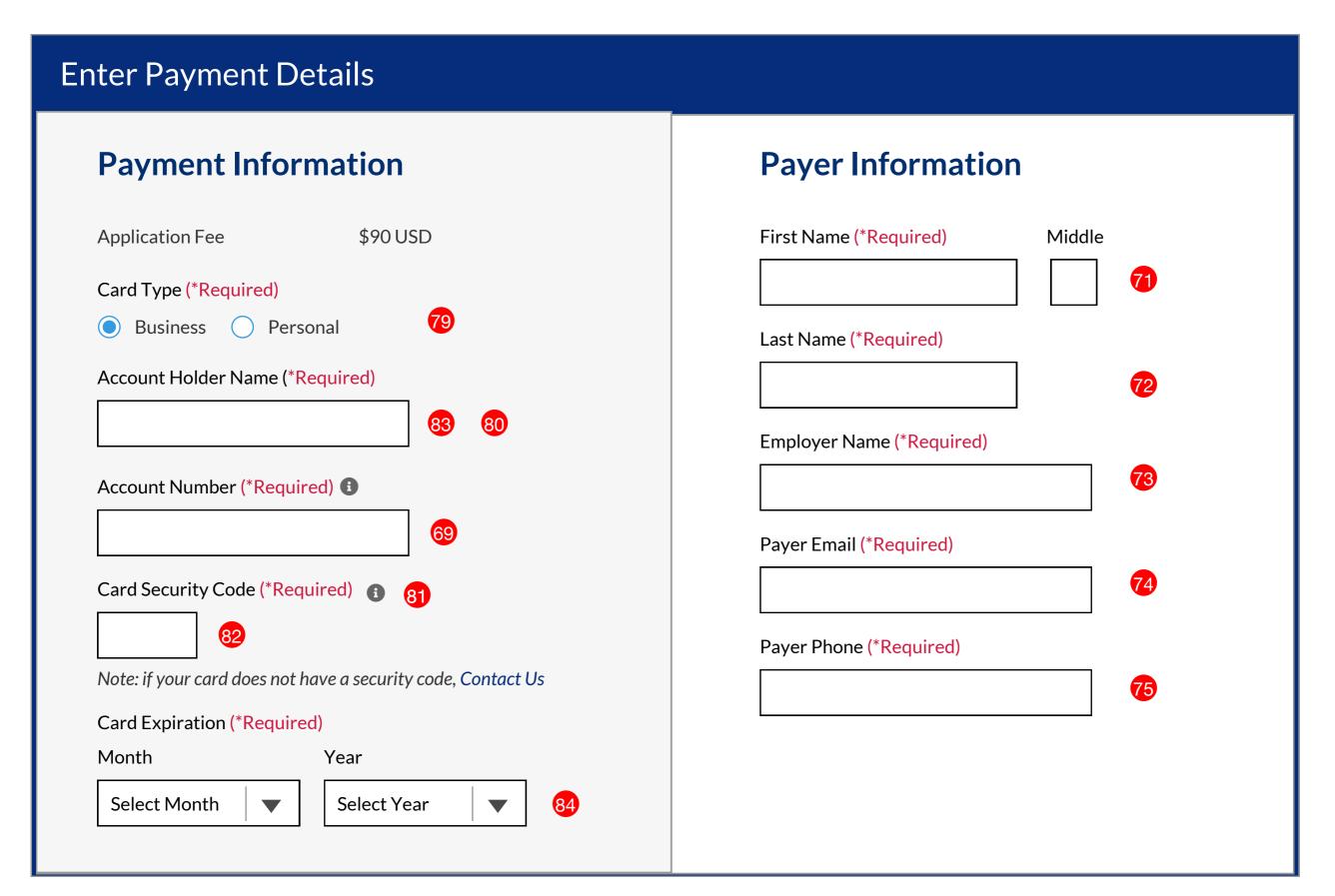
# Make Payment

**HIREVets.gov** 

We use industry-standard encryption to protect the confidentiality of your personal information. Your payment will be submitted through Pay.gov, a U.S. Government payment service.







I understand that I am authorizing a charge to the above account for this Application Fee, which covers the cost of processing my application and is non-refundable.



Submit







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# Payment Status

Print



### ✓ Your Direct Debit / ACH Payment was received and will soon be processed

Note: Payments may take 1-3 business days to process before your updated payment status is reflected on your Hirevets.gov dashboard

## **Payment Summary**

## **Payment Information**

#### **Confirmation Number**

paygov\_tracking\_id

**■** COPY

### **Payment Method**

Direct Debit / ACH Debit

#### **Payment Details**

**Business Checking** Account Type: **Business Name:** Sample, Inc Account Number: XXXXX1234 \$90 US Payment Amount:

## **Payer Information**

Payer Name: Joe Example **Employer Name:** Sample, Inc

Payer Email: joe.example@sample.com

123-456-7890 Payer Phone:

**Return to Dashboard** 







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# Payment Status

A Print



✓ Your Plastic Card Payment was successful

# **Payment Summary**

## **Payment Information**

#### **Confirmation Number**

paygov\_tracking\_id



#### **Payment Method**

Plastic Card

#### **Payment Details**

Name: Joe Example **Business Name:** Sample, Inc **Account Number:** XXXXX1234 \$90 US Payment Amount:

## **Payer Information**

Payer Name: Joe Example **Employer Name:** Sample, Inc

joe.example@sample.com Payer Email:

123-456-7890 Payer Phone:

**Return to Dashboard** 







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