OFFICE OF DIVERSITY AND EQUAL OPPORTUNITY REQUEST FOR CERTIFICATION OF AFFIRMATIVE ACTION STATUS

I do hereby request a certificate of Vietnam Era Veteran Status. I understand in accordance with the rules and regulations formulated pursuant to Executive Order 592 that this request is required to be completed and approved as prerequisite to a certificate being issued.

PLEASE PRINT		Telephone Numbers	
		Home:	
		Work:	
NAME:			
ADDRESS:			
CITY:	STATE:	ZIP:	
SOCIAL SECURITY NO:			
DATES OF ACTIVE SERVICE:		TO:	
A DD FORM 215 (Correctio		ATION. SUBMIT A COPY NOT THE ORIGINAL. LSO BE SUBMITTED IN ADDITION TO THE DD FOR THE PROGRAM.	
DD FORM 2	14	Employed by the State? Yes \Box No \Box	
DD FORM 2		Applying for a position? Yes \Box No \Box	
		Name of current State Employer:	
certified status if the inform authentic.	ation or documents which have	o request additional documentation, and/or revoke e been submitted to substantiate your request are not DATE	
IMPORTANT:		LETED BY A NOTARY PUBLIC	
County			
Personally appeared before who made oath that the fore	me the said going was his/her free act and	deed.	
Candidate's Signature		Date	
Notary Public		Date	
		Commission Expires	
	Human Resourc Office of Diversity and H 100 Cambridge Str Boston, MA	Equal Opportunity eet, Suite 600	