



# State of Nevada Veteran Hiring Preference

## Eligibility & Documentation Guide

Prepared by  
Division of Human Resource Management

Version 2026



# Purpose

This guide provides Human Resources professionals with a standardized method for determining eligibility for Veteran Hiring Preference under Nevada law.

## It explains:

- Applicable Nevada statutes
- Who qualifies for Veteran Hiring Preference
- Acceptable supporting documentation
- How to evaluate military documents
- Frequently encountered scenarios

***The goal is to ensure consistent, fair, and legally compliant hiring decisions across all State of Nevada agencies.***

## Disclaimer

This guide is intended as an administrative resource for State of Nevada Human Resources professionals. It summarizes applicable Nevada statutes and regulations governing Veteran Hiring Preference but does not replace state or federal law. When a conflict exists, the applicable law, regulation, or official policy controls.

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# Legal Authority

| Authority     | Purpose                                  |
|---------------|------------------------------------------|
| NRS 284.015   | Defines "Veteran" for State employment   |
| NRS 284.260   | Veteran hiring preference                |
| NRS 284.265   | Interview requirements                   |
| NAC 284.325   | Documentation requirements               |
| NRS 417.0187  | Evidence of service-connected disability |
| NRS 338.13843 | Definition incorporated into Chapter 284 |

**Note:** Throughout this guide, references to "Veteran" and "Veteran with a Service-Connected Disability" refer to these statutes unless otherwise indicated.



# Who Qualifies?

|                                             |                                                                                                                                                 |
|---------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| Veteran                                     | Served on Active Duty and separated under conditions other than dishonorable.                                                                   |
| Veteran with a Service-Connected Disability | Veteran whose disability has been recognized by the U.S. Department of Veterans Affairs or Department of Defense.                               |
| National Guard Member                       | Completed six continuous years of qualifying service <b>or</b> qualifies separately under NRS 284.260 as a member of the Nevada National Guard. |
| Reserve Member                              | Completed six continuous years of qualifying service.                                                                                           |
| Current Active-Duty Member                  | May establish eligibility through an official Statement of Service.                                                                             |
| Widow or Widower                            | Qualifying surviving spouse under Nevada law.                                                                                                   |



# Veteran Definition

A Veteran is an individual who:

- Served on active duty in the Armed Forces of the United States; or
- Completed qualifying National Guard or Reserve service under Nevada law; and
- Was separated under conditions other than dishonorable.
- Veteran Hiring Preference for State employment is governed by Chapter 284 of the Nevada Revised Statutes.

## Important

Different federal agencies and Nevada programs may use different Veteran definitions. This guide applies only to State of Nevada hiring.



# Documentation Overview

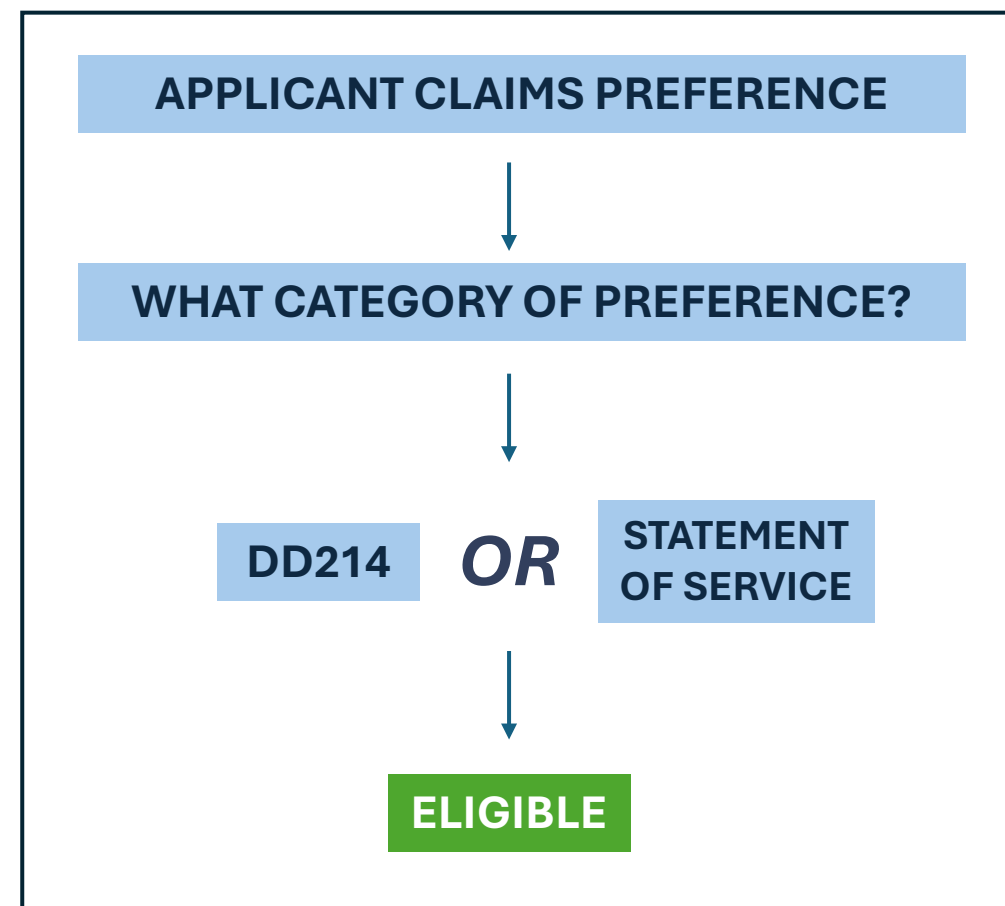
Can the applicant establish Veteran status?



**YES**

Which document did they provide?

- DD214
- Statement of Service
- NGB Form 22
- VA Letter
- DD1300
- Other Supporting Documentation



# DD214



The DD Form 214 is the primary document used to verify prior Active-Duty military service.

**Reviewers should confirm:**

- Applicant's identity
- Character of Service
- Document is final and complete

Applicants separated under conditions other than dishonorable meet the discharge requirement for Veteran Hiring Preference.

## CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                              |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------|--|
| 1. NAME (Last, First, Middle)<br><b>Timothy Joseph</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                              | 2. DEPARTMENT, COMPONENT AND BRANCH<br><b>USMC-11</b>                                                                                                                                                                                                                                                                                                                                                                                   |  | 3. SOCIAL SECURITY NO.<br><b>465 1 88 1466</b>                               |  |
| 4.a. GRADE, RATE OR RANK<br><b>Cpl</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 4.b. PAY GRADE<br><b>E-4</b> | 5. DATE OF BIRTH (YYMMDD)<br><b>690906</b>                                                                                                                                                                                                                                                                                                                                                                                              |  | 6. RESERVE OBLIG. TERM. DATE<br>Year <b>96</b> Month <b>07</b> Day <b>07</b> |  |
| 7.a. PLACE OF ENTRY INTO ACTIVE DUTY<br><b>Shreveport, LA 71107</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                              | 7.b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known)<br><b>Laneville, TX 75667</b>                                                                                                                                                                                                                                                                                                                       |  |                                                                              |  |
| 8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND<br><b>1stMaintBn, 1stFSSG, CampPen, CA 92055</b>                                                                                                                                                                                                                                                                                                                                                                                                                                           |                              | 8.b. STATION WHERE SEPARATED<br><b>1stMaintBn, 1stFSSG</b>                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                              |  |
| 9. COMMAND TO WHICH TRANSFERRED<br><b>Marine Corps Reserve Support Center (MCRSC), Overland Park, Kansas (RUC 36005)</b>                                                                                                                                                                                                                                                                                                                                                                                                               |                              | 10. SGLI COVERAGE<br>None <input type="checkbox"/> Amount: \$ <b>100,000</b>                                                                                                                                                                                                                                                                                                                                                            |  |                                                                              |  |
| 11. PRIMARY SPECIALTY (List number, title and years and months in specialty. List additional specialty numbers and titles involving periods of one or more years.)<br><b>1316-Metal Worker (03 years, 06 months)</b>                                                                                                                                                                                                                                                                                                                   |                              | 12. RECORD OF SERVICE<br>Year(s) Month(s) Day(s)<br>a. Date Entered AD This Period <b>88 08 24</b><br>b. Separation Date This Period <b>92 08 23</b><br>c. Net Active Service This Period <b>04 00 00</b><br>d. Total Prior Active Service <b>00 00 00</b><br>e. Total Prior Inactive Service <b>00 01 16</b><br>f. Foreign Service <b>00 03 04</b><br>g. Sea Service <b>00 00 00</b><br>h. Effective Date of Pay Grade <b>91 09 01</b> |  |                                                                              |  |
| 13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service)<br><b>Rifle Expert Badge (4th Award)</b><br><b>Pistol Expert Badge</b><br><b>Meritorious Mast</b><br><b>National Defense Service Medal</b><br><b>Sea Service Deployment Ribbon (w/1 star)</b><br><b>Southwest Asia Service Medal (w/1 star)</b><br><b>Certificate of Appreciation</b><br><b>Kuwaiti Liberation Medal</b>                                                                                                |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                              |  |
| 14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed)<br><b>Basic Metal Worker Course (11 weeks, 03/89)</b><br><b>Navy Alcohol/Drug Safety Action Program (11/90)</b>                                                                                                                                                                                                                                                                                                                                   |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                              |  |
| 15.a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                           |                              | 15.b. HIGH SCHOOL GRADUATE OR EQUIVALENT<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                         |  | 16. DAYS ACCRUED LEAVE PAID<br><b>RLBO.5SLBO.0</b>                           |  |
| 17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                              |  |
| 18. REMARKS<br><b>Good Conduct Medal period commences: 910613</b><br><br><b>While a member of the Marine Corps Reserve, you will keep the Director, MCRSC (Toll free 1-800-255-5082 or if within the state of Kansas call commercial (913) 236-3108; if AUTOVON is available, call 465-3110) informed of any change of address, marital status, number of dependents, civilian employment, or physical standards.</b><br><br><b>Subject to active duty recall and or annual screening.</b><br><br><b>SNM UNAVAILABLE FOR SIGNATURE</b> |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                              |  |
| 19.a. MAILING ADDRESS AFTER SEPARATION (Include Zip Code)<br><b>Route 1 Box 252A</b><br><b>Laneville, TX 75667</b>                                                                                                                                                                                                                                                                                                                                                                                                                     |                              | 19.b. NEAREST RELATIVE (Name and address - include Zip Code)<br><b>POOL, David R.</b><br><b>Route 1 Box 252A</b><br><b>Laneville, TX 75667</b>                                                                                                                                                                                                                                                                                          |  |                                                                              |  |
| 20. MEMBER REQUESTS COPY 4 BE SENT TO<br>DIR. OF VET AFFAIRS <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                       |                              | 22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature)<br><b>T. TORRESRAMOS, CW02, PERSO</b>                                                                                                                                                                                                                                                                                                                          |  |                                                                              |  |
| 21. SIGNATURE OF MEMBER BEING SEPARATED<br><b>"SEE REMARKS"</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                              |  |

|                                                                          |  |                                                                                                |  |
|--------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------|--|
| SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)     |  |                                                                                                |  |
| 23. TYPE OF SEPARATION<br><b>Transferred to the Marine Corps Reserve</b> |  | 24. CHARACTER OF SERVICE (Include upgrades)<br><b>HONORABLE</b>                                |  |
| 25. SEPARATION AUTHORITY<br><b>MARCORSEPMAN par. 1005</b>                |  | 26. SEPARATION CODE<br><b>MBK1</b>                                                             |  |
| 27. REENTRY CODE<br><b>RE-1A</b>                                         |  | 28. NARRATIVE REASON FOR SEPARATION<br><b>Completion of Required Active Service (USMC) EAS</b> |  |
| 29. DATES OF TIME LOST DURING THIS PERIOD<br><b>None</b>                 |  | 30. MEMBER REQUESTS COPY 4<br>Initials                                                         |  |

1. NAME (Last, First, Middle)

**Timothy Joseph**

Identity



24. CHARACTER OF SERVICE (Include upgrades)

**HONORABLE**

Character of Service

# DD214 Copies



| Acceptable     | Not Acceptable      |
|----------------|---------------------|
| Member 4       | Member 1            |
| Service Copy   | Worksheet (DD214WS) |
| Certified Copy | Draft Copy          |

## Important

The document must contain the Character of Service and represent the final issued separation document.



# Veterans with a Service-Connected Disability

A Veteran with a Service-Connected Disability is a Veteran whose disability has been recognized by the Department of Veterans Affairs or other authorized federal authority.

## **Acceptable evidence includes:**

- VA Benefits Summary Letter
- VA Rating Decision
- VA Award Letter
- Other official federal documentation establishing a service-connected disability recognized by the U.S. Department of Veterans Affairs **or Department of Defense.**

## **Reviewers should verify:**

- ✓ Veteran status
- ✓ Service-connected disability
- ✓ Disability determination

# Department of Veteran Affairs Official Letterhead

*This is a summary of benefits you currently receive from the Department of Veterans Affairs (VA); We are providing this letter to disabled veterans to use in applying for benefits such as..., civil service preference...*



DEPARTMENT OF VETERANS AFFAIRS  
810 Vermont Ave NW  
Washington, D.C. 20420

Month Day, Year

First Name Last Name  
Street Address  
City, State Zip

In Reply Refer to  
xxx-xx-xxxx  
27/eBenefits

Dear First Name Last Name:

This letter is a summary of benefits you currently receive from the Department of Veterans Affairs (VA). We are providing this letter to disabled Veterans to use in applying for benefits such as state or local property or vehicle tax relief, civil service preference, to obtain housing entitlements, free or reduced state park annual memberships, or any other program or entitlement in which verification of VA benefits is required. Please safeguard this important document. This letter is considered an official record of your VA entitlement.

Our records contain the following information:

## Personal Claim Information

Your VA claim number is: xxx-xx-xxxx

You are the Veteran.

## Military Information

Your most recent, verified periods of service (up to three) include:

| Branch of Service | Character of Service<br>Honorable | Entered Active Duty<br>Month Day, Year | Released/Discharged<br>Month Day, Year |
|-------------------|-----------------------------------|----------------------------------------|----------------------------------------|
|-------------------|-----------------------------------|----------------------------------------|----------------------------------------|

(There may be additional periods of service not listed above.)

## VA Benefit Information

|                                                                                                              |        |
|--------------------------------------------------------------------------------------------------------------|--------|
| You have one or more service-connected disabilities:                                                         | Yes/No |
| Your combined service-connected evaluation is:                                                               | %      |
| You are considered to be totally and permanently disabled due solely to your service-connected disabilities: | Yes/No |

You should contact your state or local office of Veterans' affairs for information on any tax, license, or fee-related benefits for which you may be eligible. State offices of Veterans' affairs are available at <http://www.va.gov/statedva.htm>.

## How You Can Contact Us

- If you need general information about benefits and eligibility, please visit us at <https://www.ebenefits.va.gov> or <http://www.va.gov>.
- Call us at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the number is 1-800-829-4833.
- Ask a question on the Internet at <https://iris.custhelp.va.gov>.





# National Guard & Reserve Members

Unlike Active Duty personnel, Guard and Reserve members may not possess a DD214.

**Eligibility may instead be established through:**

- NGB Form 22
- Statement of Service
- Other official military records

***Applicants relying upon National Guard or Reserve service must demonstrate **six continuous years of qualifying service** when required under Nevada law.***



**Reviewer Tip: NGB Form 22 Checklist**

- ✓ Character of Service is acceptable (Block 24)
- ✓ At least six years between Block 4 and Block 11
- ✓ Veteran status established

(BLOCK 24) Character of Service. **Must be anything other than dishonorable**

This is the title of the National Guard document

|                                                                                                                                                                                                                                                                                                                                                                                                                |  |          |  |                                                                                                                                                                                                      |  |               |  |                                                                                                                                                                                                                                                                                                                                                  |  |                                      |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------|--|
| DEPARTMENTS OF THE ARMY AND THE AIR FORCE<br>NATIONAL GUARD BUREAU<br>REPORT OF SEPARATION AND RECORD OF SERVICE<br>FOR USE OF THIS FORM, SEE NGR (AR) 600-200. THE PROPONENT AGENCY IS NGB-ARP-PE.                                                                                                                                                                                                            |  |          |  |                                                                                                                                                                                                      |  |               |  |                                                                                                                                                                                                                                                                                                                                                  |  |                                      |  |
| REPORT OF SEPARATION AND RECORD OF SERVICE IN THE 1 <u>Army</u> NATIONAL GUARD OF <u>CONNECTICUT</u> AND AS A RESERVE OF THE 2 <u>ARMY</u>                                                                                                                                                                                                                                                                     |  |          |  |                                                                                                                                                                                                      |  |               |  |                                                                                                                                                                                                                                                                                                                                                  |  |                                      |  |
| 1. Insert either Army or Air 2. Enlisted personnel only - Insert only Army or Air Force                                                                                                                                                                                                                                                                                                                        |  |          |  |                                                                                                                                                                                                      |  |               |  |                                                                                                                                                                                                                                                                                                                                                  |  |                                      |  |
| 1. LAST NAME - FIRST NAME - MIDDLE NAME<br>GHILLIOTT BRIAN ANDREW                                                                                                                                                                                                                                                                                                                                              |  |          |  | 2. DEPARTMENT, COMPONENT AND BRANCH<br>ARMY/ARNQUS                                                                                                                                                   |  |               |  | 3. SO <span style="background-color: black; color: black;">[REDACTED]</span>                                                                                                                                                                                                                                                                     |  |                                      |  |
| 4. DATE OF ENL                                                                                                                                                                                                                                                                                                                                                                                                 |  | YR MO DA |  | 5a. RANK                                                                                                                                                                                             |  | 5b. PAY GRADE |  | 6. DATE OF RANK                                                                                                                                                                                                                                                                                                                                  |  | 7. DATE OF BIRTH                     |  |
| 06 03 09                                                                                                                                                                                                                                                                                                                                                                                                       |  |          |  | SGT                                                                                                                                                                                                  |  | E5            |  | 09 12 08                                                                                                                                                                                                                                                                                                                                         |  | 74 04 16                             |  |
| 8a. STATION OR INSTALLATION AT WHICH EFFECTED<br>HHC 182D MP BN (H), NIAATIC, CT 06357-2597                                                                                                                                                                                                                                                                                                                    |  |          |  |                                                                                                                                                                                                      |  |               |  | 8b. EFFECTIVE DATE                                                                                                                                                                                                                                                                                                                               |  | YR MO DA                             |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                |  |          |  |                                                                                                                                                                                                      |  |               |  | 13 12 04                                                                                                                                                                                                                                                                                                                                         |  |                                      |  |
| 9. COMMAND TO WHICH TRANSFERRED<br>NA                                                                                                                                                                                                                                                                                                                                                                          |  |          |  |                                                                                                                                                                                                      |  |               |  | 10. RECORD OF SERVICE                                                                                                                                                                                                                                                                                                                            |  |                                      |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                |  |          |  |                                                                                                                                                                                                      |  |               |  | (a) NET SERVICE THIS PERIOD                                                                                                                                                                                                                                                                                                                      |  |                                      |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                |  |          |  |                                                                                                                                                                                                      |  |               |  | 07 08 26                                                                                                                                                                                                                                                                                                                                         |  |                                      |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                |  |          |  |                                                                                                                                                                                                      |  |               |  | (b) PRIOR RESERVE COMPONENT SERVICE                                                                                                                                                                                                                                                                                                              |  |                                      |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                |  |          |  |                                                                                                                                                                                                      |  |               |  | 02 05 16                                                                                                                                                                                                                                                                                                                                         |  |                                      |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                |  |          |  |                                                                                                                                                                                                      |  |               |  | (c) PRIOR ACTIVE FEDERAL SERVICE                                                                                                                                                                                                                                                                                                                 |  |                                      |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                |  |          |  |                                                                                                                                                                                                      |  |               |  | 04 00 00                                                                                                                                                                                                                                                                                                                                         |  |                                      |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                |  |          |  |                                                                                                                                                                                                      |  |               |  | (d) TOTAL SERVICE FOR PAY                                                                                                                                                                                                                                                                                                                        |  |                                      |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                |  |          |  |                                                                                                                                                                                                      |  |               |  | 14 02 12                                                                                                                                                                                                                                                                                                                                         |  |                                      |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                |  |          |  |                                                                                                                                                                                                      |  |               |  | (e) TOTAL SERVICE FOR RETIRED PAY                                                                                                                                                                                                                                                                                                                |  |                                      |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                |  |          |  |                                                                                                                                                                                                      |  |               |  | 12 04 18                                                                                                                                                                                                                                                                                                                                         |  |                                      |  |
| 11. TERMINAL DATE OF RESERVE/MILITARY SERVICE OBLIGATION                                                                                                                                                                                                                                                                                                                                                       |  |          |  |                                                                                                                                                                                                      |  |               |  | YR MO DA                                                                                                                                                                                                                                                                                                                                         |  |                                      |  |
| 2013 12 04                                                                                                                                                                                                                                                                                                                                                                                                     |  |          |  |                                                                                                                                                                                                      |  |               |  |                                                                                                                                                                                                                                                                                                                                                  |  |                                      |  |
| 12. MILITARY EDUCATION<br>(Course Title, number of weeks, month, and year completed)<br>IMAGERY GROUND STATION IGS OP, 20 WKS, AUG 00/21R10 INTERIOR ELECTRICIAN PH II, 2 WKS, APR 08/VLC, 2 WKS, MAR 11/NOTHING FOLLOWS                                                                                                                                                                                       |  |          |  |                                                                                                                                                                                                      |  |               |  | 13. PRIMARY SPECIALTY NUMBER, TITLE AND DATE AWARDED<br>(Additional specialty numbers and titles)<br>12R20, INTERIOR ELECTRICIAN, 20090526/<br>35G20, GEOSPACIAL INTELLIGENCE IMAGERY ANALYST, 20081023/<br>96H10, IMAGERY GROUND STATION OP, 20000822/NOTHING FOLLOWS                                                                           |  |                                      |  |
| 14. HIGHEST EDUCATION LEVEL SUCCESSFULLY COMPLETED<br>SECONDARY/HIGH SCHOOL 12 YRS (Gr 1-12) COLLEGE 4 YRS                                                                                                                                                                                                                                                                                                     |  |          |  |                                                                                                                                                                                                      |  |               |  | 15. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED <del>THIS PERIOD</del> (State Awards may be included)<br>ARCM-2/GCMDL-ARMY-1/AR-COMP-ACHVMT-MDL-2/INTL-DEF-SVC-MDL-1/MU C-1/INCO-PROF-DEV-RBN-1/ARMY-SVC-RBN-1/OS-SVC-RBN-2/ARMED-FCS-R ES-MDL-w-M DEVICE-1/GWOTSM-1/CASAWDIR-1/CTMOBSR-1/NOTHING FOLLOWS |  |                                      |  |
| 16. SERVICEMAN'S GROUP LIFE INSURANCE COV<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO                                                                                                                                                                                                                                                                                               |  |          |  | 17. PERSONNEL SECURITY INVESTIGATION<br>a. TYPE<br>SBI - performed and is not currently certified for SI access<br>b. DATE COMPLETED<br>Top Secret with sensitive compartmented information/20120517 |  |               |  |                                                                                                                                                                                                                                                                                                                                                  |  |                                      |  |
| 18. REMARKS<br>OTAG ORDER 311-037 DATED 20131204/ASSIGNMENT/LOSS CODE: ER/SRIP: NO/SERVICE IN KOSOVO 20001130-20010531/SOLDIER SERVED IN OPERATION DESERT SPRING/SERVICE IN IRAQ 20030127-20030712/20050717-20100514/ORDERED TO ACTIVE DUTY IN SUPPORT OF OPERATION IRAQI FREEDOM IAW 10 USC 12302/NGB FORM 22 AND NGB FORM 55 WERE MAILED TO SOLDIER'S LAST KNOWN ADDRESS AS SHOWN IN ITEM 19/NOTHING FOLLOWS |  |          |  |                                                                                                                                                                                                      |  |               |  |                                                                                                                                                                                                                                                                                                                                                  |  |                                      |  |
| 19. MAILING ADDRESS AFTER SEPARATION (Street, RFD, City, County, State and Zip Code)<br>1160 SOUTH MAIN STREET<br>MIDDLETOWN, CT 06457                                                                                                                                                                                                                                                                         |  |          |  |                                                                                                                                                                                                      |  |               |  | 20. SIGNATURE OF PERSON BEING SEPARATED<br>SOLDIER NOT AVAILABLE FOR SIGNATURE                                                                                                                                                                                                                                                                   |  |                                      |  |
| 21. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER<br>CHRISTOPHER D. MACKENZIE, CW3, SIDPERS CHIEF                                                                                                                                                                                                                                                                                                         |  |          |  |                                                                                                                                                                                                      |  |               |  | 22. SIGNATURE OF OFFICER AUTHORIZED TO SIGN<br>                                                                                                                                                                                                                                                                                                  |  |                                      |  |
| 23. AUTHORITY AND REASON<br>NGR 600-200, PARAGRAPH 6-35A; AR 135-178 PARAGRAPH 4-2B/NOTHING FOLLOWS                                                                                                                                                                                                                                                                                                            |  |          |  |                                                                                                                                                                                                      |  |               |  |                                                                                                                                                                                                                                                                                                                                                  |  |                                      |  |
| 24. CHARACTER OF SERVICE<br>Honorable                                                                                                                                                                                                                                                                                                                                                                          |  |          |  |                                                                                                                                                                                                      |  |               |  | 25. TYPE OF CERTIFICATE USED<br>NGB Form 55                                                                                                                                                                                                                                                                                                      |  | 26. REENLISTMENT ELIGIBILITY<br>RE-1 |  |
| 27. <input checked="" type="checkbox"/> REQUEST <input type="checkbox"/> DECLINE COPIES OF MY NGB FORM 22                                                                                                                                                                                                                                                                                                      |  |          |  |                                                                                                                                                                                                      |  |               |  | INITIALS _____                                                                                                                                                                                                                                                                                                                                   |  |                                      |  |
| NGB FORM 22<br>1 Nov 96                                                                                                                                                                                                                                                                                                                                                                                        |  |          |  |                                                                                                                                                                                                      |  |               |  | MPRJ (3)                                                                                                                                                                                                                                                                                                                                         |  |                                      |  |



# Current Active-Duty Members

Many applicants apply before separation from military service. A Statement of Service should reflect the applicant's current military status and expected characterization of service when available.

Because a DD214 is not issued until separation, **applicants may instead provide:**

## ✓ Statement of Service

**The Statement of Service should include:**

- Be on official letterhead
- Identify dates of service
- State character of service (or expected characterization)
- Be signed by an authorized official



DEPARTMENT OF THE ARMY

JOINT BASE LEWIS-MCCHORD, WA 98433-9500

AFZH-MIB-HR

21 April 2021

MEMORANDUM FOR RECORD

SUBJECT: Statement of Service for

1. This certifies that **NAME OF APPLICANT HERE**, is presently assigned to the  
Joint Base Lewis-McChord, WA 98433.

2. Records indicate continuous honorable active service since his entry into active duty  
20040602.

3. Service member's record maintained by this unit reflects the following information:

- a. DoD ID #:
- b. Date of birth:
- c. Basic Active Service Date: 20040602
- d. Member Currently Serving on Active Duty in the United States Army
- e. Lost time: N/A
- f. Date Originally Entered Active Duty: 20040602
- g. Date Entered Active Duty Current Tour: 20040602
- h. Expiration Term of Service/Proj/Mand Ret: N/A
- i. Anticipated Date of Departure from Active Duty: N/A

4. Monthly Pay Status at Future Assignment ( , JBPHH, HI; effective 3 May  
2021):

- a. Basic Pay: \$9,293.00
- b. COLA: \$670.00
- c. BAS: \$266.18
- d. BAH: \$4,194.00
- e. Total: \$14,423.18

5. The POC for this memorandum is the undersigned at ( or  
!@mail.mil.

MAJ, AG  
Brigade S-1



This date shows when the  
service member entered  
Active Duty.

Military dates are typically  
written as:

**YYYYMMDD**

Example:

**20040602 = June 2, 2004**

This section confirms the  
applicant is currently  
serving on Active Duty and  
has not yet separated from  
military service.

Because a DD214 is not  
issued until separation, an  
official Statement of  
Service may be used to  
verify eligibility until the  
applicant separates.



# Surviving Spouses

Qualifying surviving spouses may receive Veteran Hiring Preference under Nevada law.

## **Documentation may include:**

- DD Form 1300
- Marriage Certificate
- DD214
- Statement of Service
- Other official military documentation

## **Reviewers should verify:**

- Veteran status
- Marriage
- Death documentation when applicable



# Other Acceptable Documentation

## Supporting documentation may include:

- Veterans Identification Card (VIC)
- VA Benefits Summary
- Disability Award Letter
- Official Military Correspondence
- Certified Military Records

Supporting documentation **may assist in establishing eligibility but should contain sufficient information to support a determination. Additional documentation may be requested when necessary.**



# Documentation That Is **NOT** Sufficient

- VA Employee ID
- CAC Card
- Retiree ID
- Military Exchange Card
- Veterans Organization Membership Card
- Photographs of Uniforms
- Dog Tags
- Military Awards
- Challenge Coins
- Vehicle Registration



# Common Questions

## Can someone who is still serving qualify?

**Yes.** Applicants who are still serving may provide an official Statement of Service in place of a DD214 until they separate from military service.

## Does someone discharged during Basic Military Training qualify for Veteran Hiring Preference?

**Possibly.**

If the applicant was accepted for and assigned to active duty and was separated under conditions other than dishonorable, they may qualify for Veteran Hiring Preference under Nevada law. There is no minimum period of active-duty service required.

## How can a National Guard member qualify for Veteran Hiring Preference?

A National Guard member may qualify in **one of two ways** under Nevada law:

1. **As a Veteran** by completing at least six continuous years of qualifying National Guard service and being separated under conditions other than dishonorable.
2. **As a current member of the Nevada National Guard** by providing a letter of recommendation from the commanding officer of their unit, as authorized by **NRS 284.260**.

Applicants should provide the appropriate documentation based on the category under which they are claiming preference.



# Common Questions

## What if the DD214 I am reviewing does not show the Character of Service?

If the DD214 does not include the **Character of Service**, it **cannot be used by itself** to determine eligibility for Veteran Hiring Preference.

The applicant should be asked to provide a complete copy of the DD214 (such as a Member-4 or Service Copy) or other official military documentation that verifies the Character of Service.

Until the Character of Service can be verified, eligibility for Veteran Hiring Preference cannot be determined.

**Reviewer Tip:** Member-1 copies and DD214 Worksheets often do not include the Character of Service. Always request a complete final copy before making an eligibility determination.



# Common Questions

## Why does the DD214 I am reviewing look different from other DD214s?

The DD Form 214 has been revised multiple times over the years and older versions may look significantly different from newer editions. As long as the document is an official, final DD214, reviewers should evaluate the required information—not the appearance of the form.

**Reviewer Tip:** Verify the applicant's identity, dates of service, Character of Service, and ensure the document is a final issued copy before determining eligibility.

# Questions for the program?

Questions regarding unique or complex eligibility determinations should be directed to the Division of Human Resource Management, Veteran Programs.

| DIVISION OF HUMAN RESOURCE MANAGEMENT (DHRM) | VETERAN PROGRAMS                                                                                  |
|----------------------------------------------|---------------------------------------------------------------------------------------------------|
| EMAIL                                        | <a href="mailto:d.labarbera@admin.nv.gov">d.labarbera@admin.nv.gov</a>                            |
| PHONE                                        | 775-684-0147                                                                                      |
| VETERANS PROGRAM WEBSITE                     | <a href="https://nvjobs.nv.gov/Veterans/Veterans/">https://nvjobs.nv.gov/Veterans/Veterans/</a>   |
| STATE GOVERNMENT JOBS SITE                   | <a href="https://www.governmentjobs.com/careers/nv">https://www.governmentjobs.com/careers/nv</a> |

# REVISION HISTORY

| VERSION | DATE      | DESCRIPTION         |
|---------|-----------|---------------------|
| 1.0     | July 2026 | Initial Publication |