HUBBARD COUNTY

Veterans Preference Application

Coordinator's Office

Hubbard County Courthouse
301 Court Ave ◆ Park Rapids, MN 56470-1483
Phone (218)732-2310 ◆ FAX (218)732-2318
Email: jpaul@co.hubbard.mn.us

Hubbard County awards preference points to qualified veterans and spouses of disabled or deceased veterans subject to the provisions of Minnesota Statutes §43A.11. To be eligible for veterans preference points you must:

1. Be separated under honorable conditions from any branch of the armed forces of the United States after having served on active duty for 181 consecutive days or by reason of disability incurred while serving on active duty and be a citizen of the United States or resident, alien; or be the surviving spouse of a deceased veteran, or the spouse of a disabled veteran who, because of the disability is unable to qualify; AND

2. NOT be currently receiving or eligible to receive a monthly veteran's pension based exclusively on length of military service.

If you believe you are eligible for veteran's preference points, complete this form and provide the required documentation. The information you provide on this form will be used to determine your eligibility for veteran's preference points. You are not required to supply this information, but we cannot award veteran's points without it. This form and supporting documentation must be submitted to Human Resources within five (5) days of application deadline.

VETERAN INFORMATION			Veteran is [ ] Self [ ] Spouse
Veterans Full Name		Spouses Full Name If Claiming Preference Points	
Address			
Branch of Service		Period of Active Duty From: To:	
Rank at Discharge	Type of Discharge	Date of Final Discharge	Service Number
Do Your Years of Military Service Qualify You For A Pension? [ ] Yes [ ] No		Do You Have a Compensable Service Related Disability? [ ] Yes [ ] No	
Position(s) Interested in			Social Security Number

PREFERENCE REQUESTED	
Type	Supporting documentation required
[ ] Veteran	Copy of DD214
[ ] Disabled Veteran	Copy of DD214 and copy of letter from Veterans Administration verifying compensable service related disability
[ ] Spouse of Disabled Veteran	Copy of DD214, copy of letter from Veterans Administration verifying compensable service related disability and copy of marriage certificate
[ ] Spouse of Deceased Veteran	Copy of DD214, copy of marriage certificate and copy of death certificate
If spouse of Veteran, have you divorced or remarried? [ ] Yes [ ] No	

I hereby claim veteran's preference for this position and verify the information provided is true, accurate and correct to the best of my knowledge. I also hereby authorize the Veteran's Administration to release any information necessary to process the application to Hubbard County Human Resources Department.

Signature: _____ *Date*: _____

For Office Use Only [ ] 0 Points [ ] 5 Points [ ] 10 Points