

U.S. DEPARTMENT OF LABOR

VETERANS' EMPLOYMENT & TRAINING SERVICE



USERRA

OPERATIONS MANUAL

Last Update: 08/2018 **INTERIM RELEASE**

Chapter 1

Introduction

1.1 Enactment of the Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA). This statute replaced the previous Veterans' Reemployment Rights Act (VRRA) provisions of chapter 43, title 38, United States Code.

1.2 Purpose of USERRA. "To encourage noncareer service in the uniformed services by eliminating or minimizing the disadvantages to civilian careers and employment which can result from such service; to minimize the disruption to the lives of persons performing service in the uniformed services as well as to their employers, their fellow employees, and their communities, by providing for the prompt reemployment of such persons upon their completion of such service under honorable conditions, and to prohibit discrimination against persons because of their service in the uniformed service." Title 38, United States Code.

1.3 Objectives of USERRA. USERRA ensures that eligible persons, including all members of the uniformed services, do not lose their jobs or employment benefits because of their military service. USERRA states that the Secretary of Labor, through VETS, will provide assistance to any person with respect to employment and reemployment rights to which such person is entitled under chapter 43, title 38, United States Code.

(A "[Quick Reference](#)" Guide" can be found in the Appendices. [38 U.S.C Chapter 43](#), [20 C.F.R. Part 1002](#), and [5 C.F.R. Part 353](#) can be found at the U.S .Government Publishing Office (GPO) website, using the links provided here.)

Chapter 3

General Guidelines

3.1 Secretary of Labor’s Responsibility under USERRA. The Secretary of Labor, through the Veterans' Employment and Training Service shall provide assistance to eligible persons in exercising their statutory rights.

3.2 Legal Authority. The legal authority for the Secretary of Labor and VETS’ responsibilities and activities is found in USERRA, chapter 43, title 38, United States Code, and related predecessor statutes.

3.3 VETS Responsibility. Under the law, VETS is responsible for:

- (A) Ensuring reemployment in the proper position with proper seniority, status, pay, and all other seniority benefits for “any eligible person” who leaves a position, for the purpose of performing active military duty, active duty for training, inactive duty for training, or reporting for examination to determine fitness for military service.
- (B) Ensuring the security of rights that protect individuals from discriminatory practices motivated by their service, or from reprisals based on an individual’s action to enforce a right, or cooperating with VETS during an investigation.
- (C) Assisting employers, unions and other interested parties in resolving matters involving employment and reemployment rights issues while minimizing necessity for litigation.
- (D) Promoting voluntary compliance by fully acquainting all interested individuals and organizations through outreach and public information efforts with the provisions of USERRA.

Chapter 11

Technical Assistance

11.1 Purpose of Technical Assistance. Technical assistance seeks to broaden public awareness and understanding of the rights and obligations of service members, veterans, and their civilian employers under USERRA in an effort to increase voluntary compliance with the law.

VETS provides technical assistance to a potential claimant upon request, and his or her employer if appropriate in accordance with [38 U.S.C. 4322\(c\)\(2\)](#). Technical assistance is not limited to filing a claim; it also includes responding to requests for information on specific issues that are not yet part of a formal USERRA investigation.

The Secretary, through the Veterans' Employment and Training Service (VETS), provides assistance to any person or entity with respect to employment and reemployment rights and benefits under USERRA. This assistance includes a wide range of compliance assistance outreach activities, such as responding to inquiries; conducting USERRA briefings and Webcasts; issuing news releases; and, maintaining the elaws USERRA Advisor (located at <https://webapps.dol.gov/elaws/userra.htm>), the e-VETS Resource Advisor and other web-based materials (located at <http://www.dol.gov/vets>), which are designed to increase awareness of the Act among affected persons, the media, and the general public. In providing such assistance, VETS may request the assistance of other Federal and State agencies, and utilize the assistance of volunteers. *See 20 C.F.R. § 1002.277.*

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Quick Reference Guide

UIMS "Issue Codes" **	5 CFR (PartSec 353)	20 CFR (PartSec 1002)	38 USC (Sec 43XX)
	107	212-213	4311
ID - Military Obligations Discrimination	202	18-23	4311
	202	18-23	4311/4312
II - Initial Hiring Discrimination	202	18-23	4311
IH - Health Benefits	-	163-171	4317
IP - Pension	107	259-267	4318
IS - Seniority	-	-	-
IB - Other Non-Seniority Benefits	207	210-213	4316
IZ - Status			
IL - Layoff			
IV - Vacation	208	153	4304, 4312
	204/5	85-88	4312
	106	149-153	4312, 4316
IR - Reinstatement	203	32	4312
	207	191-199	4312
	110	139	4312
IT - Promotion			
IA - Reasonable Accommodations/Retraining for Disabled	207	191-199	4313
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IM - Pay Rate			
IF - Special Protected Period Discharge	209	247-248	4316
ID2 - Discrimination as Retaliation for any Action	202	19-23	4316, 4311
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Exhibit 1: Federal Privacy Act Release Form

FEDERAL PRIVACY ACT RELEASE FORM

To Whom It May Concern:

I hereby authorize release to the Veterans' Employment and Training Service, U.S. Department of Labor, information concerning (Check item # that apply):

- Employment Records (Specify)
- Military records (Specific Description)
- Medical Records (Specific Description)
- Other (Specify)

I am aware of the Privacy Act of 1974, 5 U.S.C. § 552a, and hereby authorize the release from my file of the information specified above.

A photocopy of the authorization shall bestow the same rights to the bearer, as the original.

_____ Signature

_____ SSN

_____ Address

_____ Date

_____ USERRA
Case Number

Exhibit 2: Medical Information Release Form (Back to Text)

MEDICAL INFORMATION RELEASE FORM

To Whom It May Concern:

I, _____, authorize any physician, hospital, clinic, or other
(Name – First, MI, Last)

health-related person or facility, to release any medical or other health-related information (including mental health) to the United States Department of Labor, Veterans' Employment and Training Service, which are deemed necessary for the Purpose of pursuing my claim under the Uniformed Services Employment and Reemployment Rights Act (USERRA) of 1994, and 38 U.S.C. §4301 et seq. This Release applies only to that claim, the designation of which appears below.

Signature of Claimant

Social Security Number

Address

Date

USERRA Case Number

Exhibit 3: Sample VETS Form 1063

**REPORT OF CONTACT/ATTEMPTED CONTACT
UNIFORMED SERVICES EMPLOYMENT AND REEMPLOYMENT
RIGHTS ACT**

U.S. Department of Labor, Veterans' Employment & Training Service

CASE NAME:

FILE NUMBER:

REPORT OF:

DATE CONDUCTED:

PHONE NUMBER(S): Home:

Work:

Cell:

Fax:

E-MAIL Address:

NAME(S):

ADDRESS(ES):

PREPARER'S SIGNATURE

DATE:

PAGE 1 OF 1 PAGES

EXHIBIT NO:

Exhibit 4: VETS Form 1010 and Instructions

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

VETS Form 1010 Instructions can be viewed both online and in offline electronic or printed versions. This Exhibit will describe both online and offline options.

The preferred version of VETS Form 1010 for use by claimants is the electronic, online version, which can be accessed, completed, and submitted via the Internet at:

<https://vets1010.dol.gov/Login.aspx>

If online submission is not used, the full PDF version of VETS Form 1010 can instead be downloaded and/or printed, and then completed using Adobe Acrobat Reader or by filling out a printed paper copy. The completed Form can then be signed/dated and saved as an electronic file suitable for email delivery, or can be printed out (and signed/dated) for delivery by fax or hand-delivery to the designed VETS address for Form 1010 submissions (which can be found on top of Page One of the PDF version of VETS Form 1010, and in the Instructions shown below).

ONLINE Instructions for VETS Form 1010

The online instructions for Form 1010 are found in the elaws USERRA Advisor and VP Advisor, at:

<https://webapps.dol.gov/elaws/vets/userra/1010.asp>

or

<https://webapps.dol.gov/elaws/vets/vetpref/1010.htm>

Here are the instructions located at the USERRA Advisor site:

Exhibit 4: VETS Form 1010 and Instructions (cont.)

INSTRUCTIONS FOR USERRA CLAIMS VETS/USERRA/VP FORM 1010

PLEASE NOTE:

The Electronic 1010 Claim filing system might be inaccessible at times. If that website is unavailable for any reason, you may submit a hard copy **Form 1010** instead. To do so, please send a hard copy 1010 form (by mail or fax) to:

Veterans' Employment and Training Service
U.S. Department of Labor
ATTENTION: Form 1010
61 Forsyth Street, S.W., Room 6T85
Atlanta, Georgia 30303

FAX: (404) 562-2313

You may submit Form 1010 in either of two ways:

1. **Submitting a signed hard copy of Form 1010.** You may download **Form 1010** to your computer, complete the items on the form that are relevant to your claim, print the form, sign and date the form, and then either mail it, or fax it, or deliver it in person, to the following VETS office *only*:

**Veterans' Employment and Training Service
U.S. Department of Labor
ATTENTION: Form 1010
61 Forsyth Street, S.W., Room 6T85
Atlanta, Georgia 30303
FAX: (404) 562-2313**

The Form 1010 information you enter after download is not being saved or collected from this Internet site; instead, you must print out the completed form and either mail it, or fax it, or deliver it in person, to the VETS address shown above.

2. **Submitting Form 1010 electronically via the Internet.** If you prefer to file Form 1010 electronically via the Internet instead of mailing a printed form, you can complete and submit the "On-line" version of Form 1010 at VETS 1010 Form On-line Submission website:
<https://vets1010.dol.gov/> .

Please read the Privacy Act statement and certification on page two of Form 1010 before signing and submitting the form.

Below are some brief instructions on filling out Form 1010. However, if questions arise that are not addressed here, please contact the **nearest VETS office** for assistance.

Exhibit 4: VETS Form 1010 and Instructions (cont.)

SPECIFIC INSTRUCTIONS

NOTE: These instructions are for persons filing USERRA claims only. If you are filing a Veterans' Preference complaint, please refer to the instructions in the [Veterans' Preference Advisor](#).

Section I

Self-explanatory.

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 complaint 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 VETS to establish your eligibility under the law.

- **Question 8** - Fill in the branch of service you that you are, have been or will be a member of.
- **Question 9** - Fill in the specific information you have of your unit including name, address and phone number.
- **Question 10** - Fill in the dates that you served in, the date that you began your service, or the date that you will begin your service.
- **Question 11** - Fill in the appropriate bubble that best describes how you were discharged.

Section III

Please report the information of the employer(s) that your complaint involves. Do so accurately because this information will be used to establish a point of contact within the agency or company.

- **Question 12** - Fill in the name of your employer or the employer you are applying for.
- **Question 13** - Fill in the address.
- **Question 14** -
 1. Fill in the name and, if possible, title of whoever you are or have been in contact with regarding your position.
(Often a HR specialist or supervisor)
 2. Fill in their phone number
- **Question 15** - Fill in the dates that you have been employed with this employer, the date that you started working for this employer, or the date you will start working for this employer.
- **Question 16** - Fill in no if you have not exceeded five cumulative years of uniformed service with this employer. Answer yes, and explain in the comment section below, if you have.
- **Question 17** - Fill in the name of any Union(s) that may represent you.
- **Question 18** - Fill in the title of the position you have, had or are applying to.

Section IV

Please use this section to detail some specifics of your complaint. Answer each question that applies to you as completely and accurately as you can.

Exhibit 4: VETS Form 1010 and Instructions (cont.)

- **Question 19** - Fill in yes if the Employer Support of the Guard and Reserve (ESGR) was involved in your claim before filing this complaint.
- **Leave Question 20 blank.** Question 20 is for Veterans' Preference complaints only.

If Claim Concerns Discrimination under USERRA

- **Question 21** - If you feel that your past, present or future military obligations were used to discriminate you by your employer; please fill in the issue that best describes your complaint.

If Claim Concerns Hiring, RIF, Promotion or Termination

- **Question 22** - Fill in the title of the position that relates to this complaint.
- **Question 23** - Fill in the pay rate for the position you had, have or were applying for.
- **Question 24** - Fill in the date you applied for the job or promotion. (Often found on the job certificate, posting)
 - 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** - Fill in yes if you provided notice of your service to your employer before you began your military service.
- **Question 26** - Specify who provided this notice.
 - a. Specify how it was provided.
 - b. Fill in the date that this notice was provided.
- **Question 27** - Fill in the name of who you provided this notice to.
- **Question 28** - Fill in the date you applied for reemployment with your employer or the date you returned to work with your employer- whichever applies to you.
- **Question 29** - Fill in the name and title of the person who you applied for reemployment with.
- **Question 30** - Fill in yes and the date if you are reemployed or have been reinstated with your employer.
 - a. If yes, fill in your position and pay rate.
 - b. If no, fill in the date that your reemployment was denied and state the reason that was given.
 - c. Fill in the name of who within your employer denied your reemployment.

Comments

Please write clearly and coherently why you are filing this claim. Detail what remedies (e.g., employment, reemployment rights, lost wages, seniority benefits) you seek by filing this claim.

Exhibit 4: VETS Form 1010 and Instructions (cont.)

PDF or Hard-Copy Instructions for VETS Form 1010

The VETS Form 1010 Instructions found on the last page of the PDF Form itself are shown here:

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

Exhibit 4: VETS Form 1010 and Instructions (cont.)

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 Veterans’ Preference (VP) in **Federal Employment**: Complete Question #20, and skip #21.
- For this claim to apply only to USERRA: 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

Exhibit 4: VETS Form 1010 and Instructions (cont.)

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.

For quick reference, the full PDF version of VETS Form 1010 is attached here:

OMB NO. 1293-0002 (EXP 01/31/2020)
VETS/USERRA/VP Form 1010 (REV 12/2013)



vets1010-EXP
01-31-2020.pdf

The pages of the PDF version of VETS Form 1010 are also viewable in the following four pages of this Exhibit.

Exhibit 4: VETS Form 1010 and Instructions (cont.)

OMB NO. 1293-0002 (EXP 01/31/2020)
VETS/USERRA/VP Form 1010 (REV 12/2013)

ELIGIBILITY DATA FORM: For claims under the Uniformed Services Employment and Reemployment Rights Act (USERRA)
and/or claims under the Veterans' Preference (VP) provisions of the Veterans' Employment Opportunities Act of 1998
U.S. Department of Labor, Veterans' Employment and Training Service

Mail (or FAX) to:

Veterans' Employment and Training Service
U.S. Department of Labor
ATTENTION: Form 1010
61 Forsyth Street, S.W., Room 6T85
Atlanta, Georgia 30303

Phone: (866) 4-USA-DOL ((866)-487-2365)
FAX: (404) 562-2313

PLEASE TYPE OR PRINT

Section I: Claimant Information

1. Name: _____
Last Name First Name M.I.

2. Address: _____
Street City State ZIP

3. Social Security No: _____ 4. Home Phone: _____ 5. Cell Phone: _____

6. Email Address: _____ 7. Do you have a military service-connected disability? Yes No

Section II: Uniformed Service Information

8. Serve(d) In: Air National Guard Army National Guard Army Reserve Air Force Reserve Naval Reserve
 Marine Corps Reserve Coast Guard Reserve Army Air Force Navy Marine Corps Coast Guard
 Public Health Service Other (Explain in "Comments") None (Retaliation Claim - Explain in "Comments")

9. If Reserve/National Guard:
(a) Name of Unit: _____
(b) Unit Address: _____
(c) Unit Phone: _____

10. Dates of Service (If applicable): (a) From: _____ To: _____
OR (b) Date of Examination/Rejection for Service: _____

11. Type of Discharge or Separation: Honorable Conditions Entry Level Uncharacterized Medical Other than Honorable
 Other (Explain in "Comments") Not Applicable

Section III: Employer Information

12. Employer or Prospective Employer's Name: _____

13. Address: _____
Street City State ZIP

14. Principal Employer Contact (PEC):
(a) PEC Name/Title: _____ (b) PEC Phone: _____

15. Employment Dates (If applicable): From: _____ To: _____

16. Since beginning work with this employer, has your cumulative uniformed service exceeded 5 years? Yes No
If YES, explain in Comments box at end of this claim form.

17. Name of Union(s) That Represent You: _____

18. Title of the Position or Occupation that is related to your claim (the job that you either now hold, or used to hold, or applied for, with this employer):

Exhibit 4: VETS Form 1010 and Instructions (cont.)

Section IV: Claim Information

19. Was the Employer Support of the Guard and Reserve (ESGR) involved in handling your claim initially? Yes No

Use items #20 and #21 to identify the program(s). (NOTE: Most claims – but not all – apply to only one program.)

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

20. Veterans' Preference Issue (Check One): Hiring Reduction-in-Force (RIF)

21. USERRA Issue(s): Military Obligations Discrimination Reinstatement Initial Hiring Discrimination
 Discrimination as Retaliation for any Action Status Pay Rate Seniority Other Non-Seniority Benefits
 Pension Layoff Promotion Vacation Health Benefits Special Protected Period Discharge
 Reasonable Accommodations/Retraining for Disabled Reasonable Accommodations/Retraining for Non-Qualified/Non-Disabled Other

If Claim Concerns Hiring, Promotion, RIF or Termination

22. Title of Position Held or Applied For: _____

23. Pay Rate: _____

24. Date of Application Employment/Promotion: _____

(a) Vacancy Announcement Number: _____

(b) Date Vacancy Opened: _____ (c) Date Vacancy Closed: _____

If Claim Concerns Reemployment Following Service

25. Was Prior Notice of Service Provided to Employer? Yes No (If "No," Explain in Comments)

26. (a) Who Provided Notice of Service to Employer? Self Other (name): _____

(b) Was the Notice of Service: Written Oral Both

(c) Date Notice of Service was given to Employer: _____

27. Name/Title of Person to Whom Notice of Service was Provided: _____

28. Date Applied for Reemployment: _____ OR Date Returned to Work: _____

29. Reemployment Application Made To: Name: _____ Title: _____

30. Reemployed or Reinstated? Yes (date): _____ No

(a) If YES, what position? _____ at what pay rate? _____

(b) If NO, Date denied: _____ Reason(s) given: _____

(c) Who denied (Name and Title): _____

PUNISHMENT FOR UNLAWFUL STATEMENTS

The information provided in this complaint will be utilized by the U.S. Department of Labor, Veterans' Employment and Training Service (VETS) to initiate an investigation of alleged violations of the Uniformed Services Employment and Reemployment Rights Act (USERRA) Title 38, U.S.C. Sections 4301-4335; and/or the Veterans' Preference (VP), provisions of the Veterans Employment Opportunities Act of 1998 (VEOA), 5 U.S.C. §3330a-3330c. Potential claimants should keep in mind that it is unlawful to "knowingly and willfully" make any "materially false, fictitious, or fraudulent statements or representation" to a federal agency. Violations can be punished under Section 2 of the False Statements Accountability Act of 1996 by a fine and/or imprisonment of not more than 5 years. 18 U.S.C. § 1001.

I certify that the above information is true and correct to the best of my knowledge and belief. I authorize the U.S. Department of Labor to contact my employer or any other person for information concerning this claim. I further authorize my employer or any other person to release such information to the U.S. Department of Labor. Pursuant to 5 U.S.C., Section 552a(b) of the Privacy Act, I authorize the U.S. Department of Labor and the U.S. Department of Defense to release information and records necessary for the investigation and prosecution of my claim.

SIGNATURE: _____ DATE: _____

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Veterans' Employment and Training Service, Room-S1316, 200 Constitution Avenue, N.W., Washington, DC 20210.

NOTIFICATION OF USERRA CLAIMANT'S RIGHTS

For claims arising under USERRA, a person has a right to commence an action for relief directly against the employer in the appropriate federal district court (in the case of a complaint against a State or private employer), pursuant to 38 U.S.C. § 4323(a)(3), or the Merit Systems Protection Board (in the case of a complaint against a Federal executive agency or the Office of Personnel Management), pursuant to 38 U.S.C. § 4324(b).

PRIVACY ACT STATEMENT

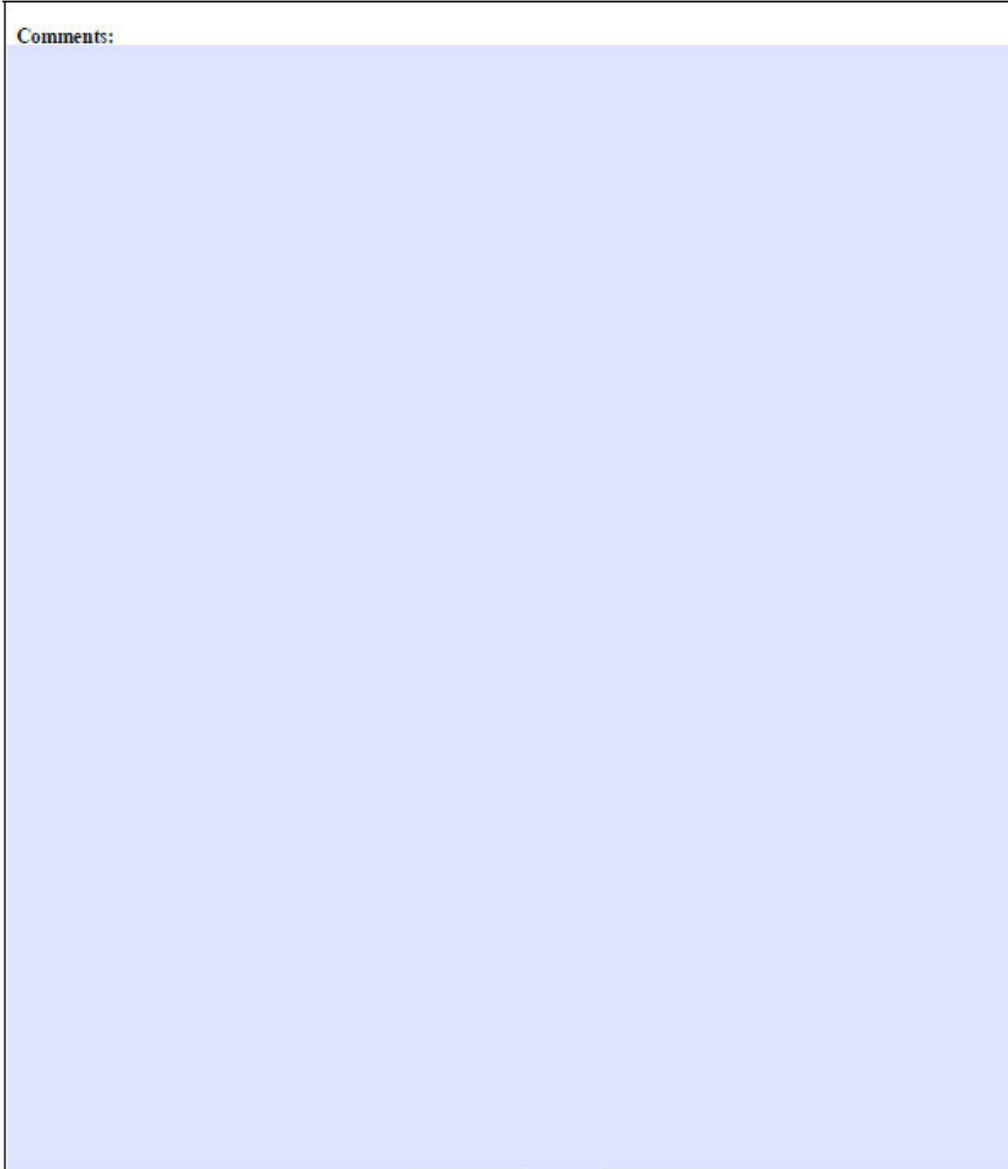
The primary use of this information is by staff of the Veterans' Employment and Training Service in investigating cases under USERRA or laws/regulations relating to veterans' preference in Federal employment. Disclosure of this information may be made to: a Federal, state or local agency for appropriate reasons; in connection with litigation; and to an individual or contractor performing a Federal function. Furnishing the information on this form, including your Social Security Number, is voluntary. However, failure to provide this information may jeopardize the Department of Labor's ability to provide assistance on your claim.

Continue in Comments box &/or use additional sheet(s) to explain items if needed – Sign and date form (above)

Exhibit 4: VETS Form 1010 and Instructions (cont.)

Explain your claim in detail – List all remedies you seek
Use additional sheet(s) if needed – Initial & date each page at bottom

Comments:



INITIALS: _____ DATE: _____

Mail (or FAX) to:

Veterans' Employment and Training Service
U.S. Department of Labor
ATTENTION: Form 1010
61 Forsyth Street, S.W., Room 6T85
Atlanta, Georgia 30303

Phone: (866) 4-USA-DOL ((866)-487-2365)
FAX: (404) 562-2313

OMB NO. 1293-0002 (EXP 01/31/2020)
VETS/USERRA/VP Form 1010 (REV 12/2013) – Page 3

Exhibit 4: VETS Form 1010 and Instructions (cont.)

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

- Question: 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 Veterans' Preference (VP) in Federal Employment: Complete Question #20, and skip #21.
 - For this claim to apply only to USERRA: 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.

Exhibit 5: Sample Cover Letter for VETS Form 1010

**U.S. Department of Labor
Office of the Assistant Secretary for Veterans'
Employment and Training
Street Address
City, State Zip Code**

Date

XXXXXXXXXX

Claimant's Street Address
City, State and Zip Code

Dear XXXXXXXXXX:

In response to your request for assistance with your rights and benefits under the Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA), you are requested to complete the enclosed USERRA Eligibility Data Form 1010 (VETS Form 1010) or you may file the VETS Form 1010 electronically by going to our website at <https://vets1010.dol.gov/>.

Complete all items to the best of your knowledge. In the comment section on the back of the form, if you run out of room, state exactly what your complaint is and what corrective action you are seeking (e.g., reinstatement to your job, seniority, pay, lost wages, etc.). Also, please provide a copy of the following: [insert appropriate documents.] If filing electronically, please provide the relevant documents separately to your investigator upon his or her request.

If you are mailing, faxing, or hand-delivering the Form 1010, send it to the following address:

U.S. Department of Labor
Atlanta Regional Lead Center
ATTENTION: Form 1010
61 Forsyth St., S.W. – Room 6T85
Atlanta, GA 30303
Fax: (404) 562-2313

Please sign, date, and submit the requested VETS Form 1010 and all accompanying documents immediately. This will enable us to act upon your complaint at the earliest possible date. Questions and correspondence about your complaint should be addressed to your VETS Investigator, when one is assigned after receipt of your completed Form 1010. Failure to promptly forward these accompanying documents may cause your case to be administratively closed, unless the failure occurs because such documentation is not readily available through no fault of your own. Please promptly advise your assigned VETS Investigator if and why you are unable to provide the requested documents.

Sincerely,

VETS Employee's Name
VETS Employee's Title

Enclosure:

VETS Form 1010

Exhibit 6: Exceptions to 5-Year Service Limit

EXCEPTIONS TO 5-YEAR LIMIT IN 38 U.S.C. § 4312 (c)

Notes:

USERRA

1. Effective with enactment of the Reserve Officer Personnel Management Act on October 6, 1994, several of the section numbers of title 10 that are referenced as exceptions to the five-year limit have been changed. In such cases, the new section number is noted in brackets after the section number stated in USERRA [1230l(a)].
2. The term “Reservist” means member of the National Guard or Reserve. Sections that apply only to National Guard or only to Coast Guard Reserve are identified as such.
3. State call-ups of National guard members are not protected under USERRA.
4. The symbol “§” means “section.”

38 U.S.C.§4312 “... does not exceed five years, except that any such period of service shall not include...”

Obligated Service -- 4312(c)(1)

Applies to initial obligations incurred beyond five years.

Unable to Obtain Release -- 4312(c)(2)

Self explanatory. Needs to be documented on a case-by-case basis.

Training Requirement -- 4312(c)(3)

10 U.S.C.§10147.....	RESERVIST regularly scheduled inactive duty training (drills) and annual training.
10 U.S.C.§10148.....	RESERVIST ordered to active duty up to forty-five days because of unsatisfactory participation.
32 U.S.C.§502(a).....	NATIONAL GUARD regularly scheduled inactive duty training and annual training.
32 U.S.C.§503.....	NATIONAL GUARD active duty for encampments, maneuvers, other exercises for field or coastal defense.

Exhibit 6: (cont.)

Specific Active Duty Provisions – 4312(c)(4)(A)

10 U.S.C.§12301(a).....	involuntary active duty in wartime.
10 U.S.C.§12301(g).....	retention on active duty while in captive status.
10 U.S.C.§ 12302.....	involuntary active duty for national emergency up to 24 months.
10 U.S.C.§12304.....	involuntary active duty for operational mission up to 270 days.
10 U.S.C.§12305.....	involuntary retention of critical persons on active duty during a period of crisis or other specific condition.
10 U.S.C.§688.....	involuntary active duty by retirees.
14 U.S.C.§331.....	COAST GUARD involuntary active duty by retired officer.
14 U.S.C.§332.....	COAST GUARD voluntary active duty by retired officer.
14 U.S.C.§359.....	COAST GUARD involuntary active duty by retired enlisted member.
14 U.S.C.§360.....	COAST GUARD voluntary active duty by retired enlisted member.
14 U.S.C.§367.....	COAST GUARD involuntary retention of enlisted member.
14 U.S.C.§712.....	COAST GUARD involuntary active duty of Reserve members to augment regular Coast Guard in time of natural/man-made disaster.

War or Declared National Emergency -- 4312(c)(4)(B)

Provides that active duty (other than for training) because of a war or national emergency is exempt from the five-year limit **whether voluntary or involuntary.**

Exhibit 6: (cont.)

Critical Operational Mission – 4312(c)(4)(C)

Provides that active duty (other than for training) in support of an operational mission for which Reservists have been activated under 10 U.S.C. § 12304 is exempt from the five-year limit, **whether voluntary or involuntary**. Note: In such a situation, **involuntary** call-ups would be under §12304. **Volunteers** may be ordered to active duty under a different authority.

Critical Missions or Requirements -- 4312(c)(4)(D)

Provides that active duty in support of certain critical missions and requirements is exempt from the 5-year limit, **whether voluntary or involuntary**. This would apply in situations such as Grenada or Panama in the 1980s, when provisions for involuntary activation of Reserves were not exercised.

Specific National Guard Provisions -- 4312(c)(4)(E)

10 U.S.C. chapter 15..... NATIONAL GUARD call into Federal service to suppress insurrection, domestic violence, etc.

10 U.S.C. §12406.....NATIONAL GUARD call into Federal service in case of invasion, rebellion, or inability to execute Federal law with active forces

20 C.F.R. “Exemptions to 5 year cumulative service”:

Sec. 1002.100; The five-year period includes only the time the employee spends actually performing service in the uniformed services. A period of absence from employment before or after performing service in the uniformed services does not count against the five-year limit. For example, after the employee completes a period of service in the uniformed services, he or she is provided a certain amount of time, depending upon the length of service, to report back to work or submit an application for reemployment. The period between completing the uniformed service and reporting back to work or seeking reemployment does not count against the five-year limit.

Sec. 1002.101; An employee is entitled to a leave of absence for uniformed service for up to five years with each employer for whom he or she works. When the employee takes a position with a new employer, the five-year period begins again regardless of how much service he or she performed while working in any previous employment relationship. If an employee is employed by more than one employer, a separate five-year period runs as to each employer independently, even if those employers share or co-determine the employee's terms and conditions of employment.

Exhibit 6: (cont.)

Sec. 1002.102; USERRA provides reemployment rights to which an employee may become entitled beginning on or after December 12, 1994, but any uniformed service performed before December 12, 1994, that was counted against the service limitations of the previous law (the Veterans Reemployment Rights Act), also counts against USERRA's five-year limit.

Sec. 1002.103; USERRA creates the following exceptions to the five-year limit on service in the uniformed services:

(1) Service that is required beyond five years to complete an initial period of obligated service. Some military specialties require an individual to serve more than five years because of the amount of time or expense involved in training. If the employee works in one of those specialties, he or she has reemployment rights when the initial period of obligated service is completed;

(2) If the employee was unable to obtain orders releasing him or her from service in the uniformed services before the expiration of the five-year period, and the inability was not the employee's fault;

(3)(i) Service performed to fulfill periodic National Guard and Reserve training requirements as prescribed by 10 U.S.C. 10147 and 32 U.S.C. 502(a) and 503; and, (ii) Service performed to fulfill additional training requirements determined and certified by a proper military authority as necessary for the employee's professional development, or to complete skill training or retraining;

(4) Service performed in a uniformed service if he or she was ordered to or retained on active duty under:

- (i) 10 U.S.C. 688 (involuntary active duty by a military retiree);
- (ii) 10 U.S.C. 12301(a) (involuntary active duty in wartime);
- (iii) 10 U.S.C. 12301(g) (retention on active duty while in captive status);
- (iv) 10 U.S.C. 12302 (involuntary active duty during a national emergency for up to 24 months);
- (v) 10 U.S.C. 12304 (involuntary active duty for an operational mission for up to 270 days);
- (vi) 10 U.S.C. 12305 (involuntary retention on active duty of a critical person during time of crisis or other specific conditions);
- (vii) 14 U.S.C. 331 (involuntary active duty by retired Coast Guard officer);
- (viii) 14 U.S.C. 332 (voluntary active duty by retired Coast Guard officer);
- (ix) U.S.C. 359 (involuntary active duty by retired Coast Guard enlisted member);
- (x)) 14 U.S.C. 360 (voluntary active duty by retired Coast Guard enlisted member);
- (xi)) 14 U.S.C. 367 (involuntary retention of Coast Guard enlisted member on active duty); and
- (xii)) 14 U.S.C. 712 (involuntary active duty by Coast Guard Reserve member for natural or man-made disasters).

(5) Service performed in a uniformed service if the employee was ordered to or

retained on active duty (other than for training) under any provision of law because of a war or national emergency declared by the President or the Congress, as determined by the Secretary concerned;

(6) Service performed in a uniformed service if the employee was ordered to active duty (other than for training) in support of an operational mission for which personnel have been ordered to active duty under 10 U.S.C. 12304, as determined by a proper military authority;

(7) Service performed in a uniformed service if the employee was ordered to active duty in support of a critical mission or requirement of the uniformed services as determined by the Secretary concerned; and,

(8) Service performed as a member of the National Guard if the employee was called to respond to an invasion, danger of invasion, rebellion, danger of rebellion, insurrection, or the inability of the President with regular forces to execute the laws of the United States.

(9) Service performed to mitigate economic harm where the employee's employer is in violation of its employment or reemployment obligations to him or her.

The National Committee for Employer Support of the Guard and Reserve will keep the VETS national office informed of developments in this area as they occur (e.g., the manner in which the necessity of additional Reserve training is to be documented).

INSTRUCTION AND INFORMATION SHEET FOR SF 180, REQUEST PERTAINING TO MILITARY RECORDS

1. General Information. The Standard Form 180, Request Pertaining to Military Records (SF180) is used to request information from military records. Certain identifying information is necessary to determine the location of an individual's record of military service. Please try to answer each item on the SF 180. If you do not have and cannot obtain the information for an item, show "NA," meaning the information is "not available". Include as much of the requested information as you can. Incomplete information may delay response time. To determine where to mail this request see Page 2 of the SF180 for record locations and facility addresses.

Online requests may be submitted to the National Personnel Records Center (NPRC) by a veteran or deceased veteran's next-of-kin using eVetRecs at <http://www.archives.gov/veterans/military-service-records/>.

2. Personnel Records/Military Human Resource Records/Official Military Personnel File (OMPF) and Medical Records/Service Treatment Records (STR). Personnel records of military members who were discharged, retired, or died in service **LESS THAN 62 YEARS AGO** and medical records are in the legal custody of the military service department and are administered in accordance with rules issued by the Department of Defense and the Department of Homeland Security (DHS, Coast Guard). STRs of persons on active duty are generally kept at the local servicing clinic. After the last day of active duty, STRs should be requested from the appropriate address on page 2 of the SF 180. (See item 3, Archival Records, if the military member was discharged, retired or died in service more than 62 years ago.)

a. **Release of information:** Release of information is subject to restrictions imposed by the military services consistent with Department of Defense regulations, the provisions of the Freedom of Information Act (FOIA) and the Privacy Act of 1974. The service member (either past or present) or the member's legal guardian has access to almost any information contained in that member's own record. The authorization signature of the service member or the member's legal guardian is needed in Section III of the SF180. Others requesting information from military personnel records and/or STRs must have the release authorization in Section III of the SF 180 signed by the member or legal guardian. If the appropriate signature cannot be obtained, only limited types of information can be provided. If the former member is deceased, the surviving next-of-kin may, under certain circumstances, be entitled to greater access to a deceased veteran's records than a member of the general public. The next-of-kin may be any of the following: unremarried surviving spouse, father, mother, son, daughter, sister, or brother. Requesters **MUST provide proof of death, such as a copy of a death certificate, newspaper article (obituary) or death notice, coroner's report of death, funeral director's signed statement of death, or verdict of coroner's jury.**

b. **Fees for records:** There is no charge for most services provided to service members or next-of-kin of deceased veterans. A nominal fee is charged for certain types of service. In most instances, service fees cannot be determined in advance. If your request involves a service fee, you will receive an invoice with your records.

3. Archival Records. Personnel records of military members who were discharged, retired, or died in service **62 OR MORE YEARS AGO** have been transferred to the legal custody of NARA and are referred to as "archival records".

a. **Release of Information:** Archival records are open to the public. The Privacy Act of 1974 does not apply to archival records, therefore, written authorization from the veteran or next-of-kin is not required. In order to protect the privacy of the veteran, his/her family, and third parties named in the records, the personal privacy exemption of the Freedom of Information Act (5 U.S.C. 552 (b) (6)) may still apply and may preclude the release of some information.

b. **Fees for Archival Records:** Access to archival records are granted by offering copies of the records for a fee (44 U.S.C. 2116 (c)). If a fee applies to the photocopies of documents in the requested record, you will receive an invoice. Photocopies will be sent after payment is made. For more information see <http://www.archives.gov/st-louis/archival-programs/military-personnel-archival/ompf-archival-requests.html>.

4. Where reply may be sent. The reply may be sent to the service member or any other address designated by the service member or other authorized requester. If the designated address is NOT registered to the addressee by the U.S. Postal Service (USPS), provide BOTH the addressee's name AND "in care of" (c/o) the name of the person to whom the address is registered on the NAME line in Section III, item 3, on page 1 of the SF 180. The COMPLETE address must be provided, INCLUDING any apartment/suite/unit/lot/space/etc. number.

5. Definitions and abbreviations. DISCHARGED -- the individual has no current military status; SERVICE TREATMENT RECORD (STR) -- The chronology of medical, mental health, and dental care received by service members during the course of their military career (does not include records of treatment while hospitalized); TDRL -- Temporary Disability Retired List.

6. Service completed before World War I. National Archives Trust Fund (NATF) forms must be used to request these records. Obtain the forms by e-mail from inquire@nara.gov or write to the Code 6 address on page 2 of the SF 180.

PRIVACY ACT OF 1974 COMPLIANCE INFORMATION

The following information is provided in accordance with 5 U.S.C. 552a(e)(3) and applies to this form. Authority for collection of the information is 44 U.S.C. 2907, 3101, and 3103, and Public Law 104-134 (April 26, 1996), as amended in title 31, section 7701. Disclosure of the information is voluntary. If the requested information is not provided, it may delay servicing your inquiry because the facility servicing the service member's record may not have all of the information needed to locate it. The purpose of the information on this form is to assist the facility servicing the records (see the address list) in locating the correct military service record(s) or information to answer your inquiry. This form is then retained as a record of disclosure. The form may also be disclosed to Department of Defense components, the Department of Veterans Affairs, the Department of Homeland Security (DHS, U.S. Coast Guard), or the National Archives and Records Administration when the original custodian of the military health and personnel records transfers all or part of those records to that agency. If the service member was a member of the National Guard, the form may also be disclosed to the Adjutant General of the appropriate state, District of Columbia, or Puerto Rico, where he or she served.

PAPERWORK REDUCTION ACT PUBLIC BURDEN STATEMENT

Public burden reporting for this collection of information is estimated to be five minutes per request, including time for reviewing instructions and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to National Archives and Records Administration (ISSD), 8601 Adelphi Road, College Park, MD 20740-6001. **DO NOT SEND COMPLETED FORMS TO THIS ADDRESS.** SEND COMPLETED FORMS TO THE APPROPRIATE ADDRESS LISTED ON PAGE 2 OF THE SF 180.

REQUEST PERTAINING TO MILITARY RECORDS

Requests from veterans or deceased veteran's next-of-kin may be submitted online by using eVetRecs at <http://www.archives.gov/veterans/military-service-records/>
To ensure the best possible service, please thoroughly review the accompanying instructions before filling out this form. PLEASE PRINT LEGIBLY OR TYPE BELOW.

SECTION I - INFORMATION NEEDED TO LOCATE RECORDS (Furnish as much information as possible.)

1. NAME USED DURING SERVICE (last, first, full middle)		2. SOCIAL SECURITY #		3. DATE OF BIRTH		4. PLACE OF BIRTH	
5. SERVICE, PAST AND PRESENT (For an effective records search, it is important that ALL service be shown below.)							
	BRANCH OF SERVICE	DATE ENTERED	DATE RELEASED	OFFICER	ENLISTED	SERVICE NUMBER (If unknown, write "unknown")	
a. ACTIVE	-			<input type="checkbox"/>	<input type="checkbox"/>		
b. RESERVE	-			<input type="checkbox"/>	<input type="checkbox"/>		
c. STATE NATIONAL GUARD	-			<input type="checkbox"/>	<input type="checkbox"/>		

6. IS THIS PERSON DECEASED? NO YES - *MUST provide Date of Death if veteran is deceased:* _____

7. DID THIS PERSON RETIRE FROM MILITARY SERVICE? NO YES

SECTION II - INFORMATION AND/OR DOCUMENTS REQUESTED

1. CHECK THE ITEM(S) YOU ARE REQUESTING:

DD Form 214 or equivalent. Year(s) in which form(s) issued to veteran: _____

This form contains information normally needed to verify military service. A copy may be sent to the veteran, the deceased veteran's next-of-kin, or other persons or organizations, if authorized in Section III, below. An UNDELETED DD214 is ordinarily required to determine eligibility for benefits. If you request a DELETED copy, the following items will be blacked out: authority for separation, reason for separation, reenlistment eligibility code, separation (SPD/SPN) code, and, for separations after June 30, 1979, character of separation and dates of time lost.

An UNDELETED copy will be sent UNLESS YOU SPECIFY A DELETED COPY by checking this box: I want a DELETED copy.

Medical Records Includes Service Treatment Records, Health (outpatient) and Dental Records. IF HOSPITALIZED (inpatient) the FACILITY NAME and DATE (month and year) for EACH admission MUST be provided: _____

Other (Specify): _____

2. PURPOSE: (Providing information about the purpose of the request is strictly voluntary; however, it may help to provide the best possible response and may result in a faster reply. Information provided will in no way be used to make a decision to deny the request.)

- Benefits (explain)
 Employment
 VA Loan Programs
 Medical
 Genealogy
 Correction
 Personal
 Other (explain)

Explain here: _____

SECTION III - RETURN ADDRESS AND SIGNATURE

1. REQUESTER NAME: _____

2. I am the MILITARY SERVICE MEMBER OR VETERAN identified in Section I, above.

I am the DECEASED VETERAN'S NEXT-OF-KIN (MUST submit Proof of Death. See item 2a on instruction sheet.)

(Relationship to deceased veteran)

I am the VETERAN'S LEGAL GUARDIAN (MUST submit copy of Court Appointment) or AUTHORIZED REPRESENTATIVE (MUST submit copy of Authorization Letter or Power of Attorney)

OTHER _____
(Specify type of Other)

3. SEND INFORMATION/DOCUMENTS TO:
(Please print or type. See item 4 on accompanying instructions.)

Name _____

Street _____ Apt. _____

City _____ State _____ Zip Code _____

4. AUTHORIZATION SIGNATURE: I declare (or certify, verify, or state) under penalty of perjury under the laws of the United States of America that the information in this Section III is true and correct and that I authorize the release of the requested information. (See items 2a or 3a on accompanying instruction sheet. Without the Authorization Signature of the veteran, next-of-kin of deceased veteran, veteran's legal guardian, authorized government agent, or other authorized representative, only limited information can be released unless the request is archival. No signature is required if the request is for archival records.)

Signature Required - Do not print _____ Date _____

Daytime phone _____ Fax Number _____

Email address _____

* This form is available at <http://www.archives.gov/veterans/military-service-records/standard-form-180.html> on the National Archives and Records Administration (NARA) web site. *

The various categories of military service records are described in the chart below. For each category there is a code number which indicates the address at the bottom of the page to which this request should be sent. Please refer to the Instruction and Information Sheet accompanying this form as needed.

BRANCH	CURRENT STATUS OF SERVICE MEMBER		
		Personnel Record	Medical or Service Treatment Record
AIR FORCE	Discharged, deceased, or retired before 5/1/1994	14	14
	Discharged, deceased, or retired 5/1/1994 – 9/30/2004	14	11
	Discharged, deceased, or retired 10/1/2004 – 12/31/2013	1	11
	Discharged, deceased, or retired on or after 1/1/2014	1	13
	Active (including National Guard on active duty in the Air Force), TDRL, or general officers retired with pay	1	
	Reserve, IRR, Retired Reserve in non-pay status, current National Guard officers not on active duty in the Air Force, or National Guard released from active duty in the Air Force	2	
	Current National Guard enlisted not on active duty in the Air Force	2	13
COAST GUARD	Discharge, deceased, or retired before 1/1/1898	6	
	Discharged, deceased, or retired 1/1/1898 – 3/31/1998	14	14
	Discharged, deceased, or retired 4/1/1998 – 9/30/2006	14	11
	Discharged, deceased, or retired 10/1/2006 – 9/30/2013	3	11
	Discharged, deceased, or retired on or after 10/1/2013	3	14
	Active, Reserve, Individual Ready Reserve or TDRL	3	
MARINE CORPS	Discharged, deceased, or retired before 1/1/1895	6	
	Discharged, deceased, or retired 1/1/1905 – 4/30/1994	14	14
	Discharged, deceased, or retired 5/1/1994 – 12/31/1998	14	11
	Discharged, deceased, or retired 1/1/1999 – 12/31/2013	4	11
	Discharged, deceased, or retired on or after 1/1/2014	4	8
	Individual Ready Reserve	5	
	Active, Selected Marine Corps Reserve, TDRL	4	
ARMY	Discharged, deceased, or retired before 11/1/1912 (enlisted) or before 7/1/1917 (officer)	6	
	Discharged, deceased, or retired 11/1/1912 – 10/15/1992 (enlisted) or 7/1/1917 – 10/15/1992 (officer)	14	
	Discharged, deceased, or retired 10/16/1992 – 9/30/2002	14	11
	Discharged, deceased, or retired (including TDRL) 10/1/2002 – 12/31/2013	7	11
	Discharged, deceased, or retired (including TDRL) on or after 1/1/2014	7	9
	Current Soldier (Active, Reserve (including Individual Ready Reserve) or National Guard)	7	
NAVY	Discharged, deceased, or retired before 1/1/1886 (enlisted) or before 1/1/1903 (officer)	6	
	Discharged, deceased, or retired 1/1/1886 – 1/30/1994 (enlisted) or 1/1/1903 – 1/30/1994 (officer)	14	14
	Discharged, deceased, or retired 1/31/1994 – 12/31/1994	14	11
	Discharged, deceased, or retired 1/1/1995 – 12/31/2013	10	11
	Discharged, deceased, or retired on or after 1/1/2014	10	8
	Active, Reserve, or TDRL	10	
PHS	Public Health Service - Commissioned Corps officers only	12	

ADDRESS LIST OF CUSTODIANS and SELF-SERVICE WEBSITES (BY CODE NUMBERS SHOWN ABOVE) – Where to write/send this form

1	Air Force Personnel Center HQ AFPC/DPSIRP 550 C Street West, Suite 19 Randolph AFB, TX 78150-4721	6	National Archives & Records Administration Research Services (RDTIR) 700 Pennsylvania Avenue NW Washington, DC 20408-0001	11	Department of Veterans Affairs Records Management Center ATTN: Release of Information P.O. Box 5020 St. Louis, MO 63115-5020
2	Air Reserve Personnel Center Records Management Branch (DPTSC) 18420 E. Silver Creek Avenue Building 390 MS 68 Buckley AFB, CO 80011	7	US Army Human Resources Command's web page: https://www.hrc.army.mil/TAGD/Accessing%20or%20Requesting%20Your%20Official%20Military%20Personnel%20File%20Documents or 1-888-ARMYHRC (1-888-276-9472)	12	Division of Commissioned Corps Officer Support ATTN: Records Officer 1101 Wootton Parkway, Plaza Level, Suite 100 Rockville, MD 20852
3	Commander, Personnel Service Center (BOPS-C-MR) MS7200 US Coast Guard 2703 Martin Luther King Jr Ave SE Washington, DC 20593-7200 MR_CustomerService@uscg.mil	8	Navy Medicine Records Activity (NMRA) BUMED Detachment St. Louis 4300 Goodfellow Boulevard, Building 103 St. Louis, MO 63120	13	AF STR Processing Center ATTN: Release of Information 3370 Nacogdoches Road, Suite 116 San Antonio, TX 78217
4	Headquarters U.S. Marine Corps Manpower Management Records & Performance (MMRP-10) 2008 Elliot Road Quantico, VA 22134-5030	9	AMEDD Record Processing Center 3370 Nacogdoches Road, Suite 116 San Antonio, TX 78217	14	National Personnel Records Center (Military Personnel Records) 1 Archives Drive St. Louis, MO 63138-1002 eVetRecs: http://www.archives.gov/veterans/military-service-records/
5	Marine Forces Reserve 2000 Opelousas Avenue New Orleans, LA 70146-5400	10	Navy Personnel Command (PERS-313) 5720 Integrity Drive Millington, TN 38055-3120		

Exhibit 8: Sample Letter to Complainant Acknowledging Case Opening

**U.S. Department of Labor
VETS Office
Street Address
City, State, Zip Code**

Date

Claimant Name
Street Address
City, State, Zip Code

RE: Claimant Name
Case Number

Dear Claimant's Name:

We have received your Uniformed Services Employment and Reemployment Rights Act (USERRA) complaint against your employer, EEEEEEEE, and opened a case on October 1, 20XX. You may have already received, or will soon be receiving, a separate email or letter acknowledging receipt of your complaint and providing a fact sheet that describes your rights with respect to the complaint process.

Please submit all documentation relevant to your complaint to me at the letterhead address as soon as possible. **Do not send originals, send unaltered complete copies only.** (NOTE TO INVESTIGATOR: If eligibility documentation was not provided with the original submission or if there are specific documents necessary for the investigation, include a request for the documentation here.)

Our agency is required to report information to Congress concerning individuals who file USERRA complaints. Specifically, we must report on the employment positions that are the subjects of complaints and whether claimants have a service-connected disability. Please note that the report to Congress is a summary report and that the names of individual claimants are not reported. Please provide a description of the position that is related to your complaint and advise whether you have a service-connected disability.

If you signed an arbitration agreement (or if an arbitration agreement is part of a relevant collective bargaining agreement at your worksite), you should submit a complete copy of the agreement as soon as possible.

The following is important if you have witnesses who can provide documentary and/or testimonial evidence to support your complaint:

The following information must be provided for each witness:

- Full name, address (including zip code), and telephone number (including area code; If the witness is a co-worker, provide his/her job title;
- Summarize the information you believe the witness is able to provide; and
- Provide the date, time, and place that is most convenient to meet with or contact the witness. The place should be away from the work site, if possible.
- If asked to, you must assist in locating your witnesses; Do not “coach” witnesses by telling them what to say;
- Witness interviews may be face-to-face, by telephone, or by mail; You will not be allowed to participate when a witness is being interviewed; A witness may refuse to cooperate without providing justification;
- Witness anonymity is provided to the extent possible by the Veterans’ Employment and Training Service. However, if your complaint is referred to the U.S. Attorney General/Office of Special Counsel (select relevant agency) for possible litigation, witness identities may be revealed to interested parties; and
- Protection against retaliation to those who assist with the investigation is provided by the reemployment rights statute.

VETS will investigate your complaint and if it determines that the alleged action occurred, it will attempt to resolve the complaint by making reasonable efforts to ensure that the employer complies with USERRA. If VETS is not able to resolve your complaint, VETS will notify you in writing of the results of its investigation and advise you of the right to seek referral of your complaint to the U.S. Attorney General/Office of Special Counsel (select relevant agency) for consideration of litigation.

Sincerely,

Investigator’s Name
Investigator’s Title

Exhibit 9: Sample Employer Opening Letter – Reinstatement (Back to Text)

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State, Zip Code**

Date

EEEE

Street

Suite

City, State Zip

Re: XXXX

Case No.

Dear EEEE:

Thank you for taking the time to speak with me on (date), regarding the above-referenced matter. As I explained in our telephone conversation, this agency is responsible for seeking compliance with the Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA), codified at Title 38 U.S. Code Sections 4301 – 4335 and 20 C.F.R. Part 1002. (XXXX) has requested assistance in determining and exercising his reemployment rights under USERRA into an appropriate position at (the Employer).

In general, to qualify for reemployment protections under USERRA, a service member must leave an employment position to perform military service, provide notice to the employer of the military service, serve for fewer than five years, have a qualifying discharge from the military, and make a timely request for reemployment. *See* 38 U.S.C. 4312(a) and 20 CFR 1002.32. (XXXX) began employment with Employer on (date). He was a (Position) when he left on (date) to perform service in the uniformed services and provided notice of his/her military service. He served honorably in the (unit/branch) from (date) to (date). Based on the information provided to date, (XXXX) is eligible for employment protection under USERRA.

(XXXX) states he was employed with Employer from October 1991 to present. (XXXX) contends that, while he was deployed for service in the uniformed services, a contract was passed which resulted in several positions being opened. Many senior employees retired, and many jobs became open, including the job of Position, for which XXXX applied. According to (XXXX), the Position was awarded to someone other than (XXXX). (XXXX) sought the Position because, while it may not be a more senior position than his current position, the status inherent to the position is viewed as being

greater than the status of his current position.

(XXXX) maintains that it is the practice of the Employer to award such jobs based on seniority. (XXXX) contends that he was the most senior person who bid for that job and, as such, he should have been placed in that job upon his return from service in the uniformed services. (XXXX) stated that the Employer told him that because he was not physically there to bid on the job, it had no obligation to offer him the job.

If it is your practice to award jobs based on seniority, and if (XXXX) bid on Position (or if it is reasonably certain that he would have bid on this job) and he was the most senior bidding on that job, then USERRA requires that he be placed in Position, effective upon his date of reemployment. Should the evidence support the claimant's allegations he may be eligible for lost or disadvantaged wages and benefits from the date of his applications for reemployment, until a proper offer of reemployment is made.

Please provide us with your position statement and any documentation that will support your position that you did not violate (XXXX's) rights under USERRA when you failed to promote him into Position when he returned from military duty.

Your response is requested by (date 10 business days from submission of letter).

Please contact me at (phone number) if you have questions regarding this complaint.

Sincerely,

Investigator

cc: XXXX

Exhibit 10: Sample Employer Opening Letter – Discrimination (Back to Text)

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State, Zip Code**

Date

(EEEE)

Street

Suite

City, State Zip

Re: (XXXX)

Case No.

Dear (EEEE):

Thank you for taking the time to speak with me on (date) regarding the above referenced matter. As I explained in our telephone conversation, this agency is responsible for seeking compliance with the Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA), codified at Title 38 U.S. Code Sections 4301 – 4335 and 20 C.F.R. Part 1002. (XXXX) has requested our assistance in determining and exercising his employment rights under USERRA and restoring him to his former position at the ((Employer)).

A person alleging discrimination under USERRA must establish that he or she is protected as result of past, present or future affiliation with the uniformed services, that an adverse employment action by the (Employer) or prospective (Employer) occurred, and that there was a causal relationship between the claimant's protected status and the adverse employment action. The claimant does not need to show that his or her status was the sole factor in the employment action; the person need only show that his or her status was a motivating factor in the employment action. 20 C.F.R. § 1002.23.

(XXXX) states he was employed by (Employer) from September 14, 1998, until December 20, 2006, when he was terminated. (XXXX) contends that his service in the U.S. Air Force Reserve was a motivating factor in his termination. Specifically, (XXXX) complains that, on several occasions, he was threatened with termination because of his military requirements. (XXXX) states that one such threat occurred in January 2005, after he informed his supervisor, (Supervisor's name), of upcoming military duty. (XXXX) complains that the authenticity of his orders was challenged by Supervisor, who subsequently contacted (XXXX's) military commander to confirm his service requirements. Additionally, upon his return from that duty in late February 2006, (XXXX) contends that he was harassed and threatened for using military leave. Also,

(XXXX) further contends that in August 2006, after giving notice of upcoming military service, Supervisor remarked to the effect that were it not for (XXXX)'s military service, he would not be working. XXXX understood this to be a disparaging remark that was meant to convey disdain for his military service. XXXX reported for duty on September 5 and returned on October 2, at which time he informed his supervisor of additional military service. Thereafter, (Employer) proceeded with a pre-disciplinary meeting. (XXXX) was terminated on December 20, 2006.

(XXXX) complains that he was terminated because (state the specific reasons provided by the claimant). During our conversation, you indicated that you had information which supports the termination and that his military service was in no way a motivating factor in this decision. Please provide us with your position statement and documentation that will support your position regarding(XXXX)'s termination.

This request includes all documents, including email, handwritten notes, memoranda, or any other means of recording information from anyone exercising any authority of (XXXX), that relate in any way to (XXXX)'s performance, disciplinary actions, or his military service. We need to know specifically the circumstance of (XXXX)'s termination and what was considered in the termination action.

Should the evidence support (XXXX)'s allegations,(XXXX) may be eligible for wages and benefits lost because of the employment action.

Your response is requested by (date 10 business days from submission of letter).

Please contact me at (phone number) if you have questions regarding this complaint.

Sincerely,

Investigator

cc: (XXXX)

Exhibit 11: Sample Opening and Closing Letter (Back to Text)

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State, Zip Code**

Date

(EEEE)
Street Address
City, State, Zip Code

Re: (XXXX)
Case Number

Dear (EEEE) :

Thank you for taking such prompt action to provide a proper reemployment position to reservist (XXXX) . (XXXX) has verified that he started work on Monday, August 1st. His position is "20 Cold Form Press Brake Operator" on the 2nd shift. His starting rate is \$12.53 per hour. His seniority date is May 15, 20XX.

In view of this action, we are closing (XXXX)'s case file.

Sincerely,

Investigator's Name
Investigator's Title

cc: (XXXX)

Exhibit 14: Sample Letter Scheduling On-Site Visit

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State, Zip Code**

Date

(EEEE)

Street Address

City, State, Zip Code

Re: (XXXX)

Case Number

Dear EEEE:

This confirms our conversation yesterday concerning (XXXX)'s claim under the Uniformed Services Employment and Reemployment Rights Act (USERRA) in which we agreed that I will visit your establishment at (time and date) to conduct an on-site investigation. I request that you make the following documents (and witnesses if appropriate) available for review during our conference:

- (XXXX)'s personnel file, including all performance evaluations;
- (EEEE)'s military leave policy;
- The personnel files of any assembly operators who were hired after (XXXX) entered employment with (EEEE); and
- Witnesses (XXXXXXXX), (XXXXXXXX), and (XXXXXXXX).

Thank you for your cooperation.

Sincerely,

Investigator's Name

Investigator's Title

cc: (XXXX)

Exhibit 15: Blank Witness Statement (Back to Text)

Witness Statement

I, _____,
(Name) (Address & Telephone #)

make the following voluntary statement to _____,

(Investigator)

who has identified himself/herself to me as an investigator for the Veterans' Employment and Training Service, U.S. Department of Labor, and who has advised me that he/she is conducting an investigation pursuant to 38 U.S.C. Section 4301 *et. seq.*, and/or predecessor Federal veterans' reemployment rights statute(s). I understand that my statement and identity will be kept confidential to the maximum extent possible under existing law.

(Body of the Statement)

(The first paragraph should contain background information regarding the witness that will establish the witness' relationship to the claimant or case. This might include the place of the witness' employment, type of position held, possible association with the claimant, and possible union affiliation)

(The subsequent paragraphs should begin to address the issue(s) in dispute and should be organized either chronologically or topically and must be, to the extent possible, in the words of the witness. Also, the paragraphs should reflect the source of all information and must be clearly identified. It should be clear from the signed statement whether or not the witness has first-hand knowledge of the information the claimant is alleging. If the information comes from a source other than what the witness saw and/or heard, the source must be identified.)

(All additions and deletions in the body of the signed statement must be made and initialed by the interviewee.)

(All pages must be numbered. The interviewee must place his/her initials next to the last word in the last line of the last paragraph on each page.)

I have read (or have had read to me) the foregoing statement of _____ page(s). Each page has been numbered and I have initialed each correction. I declare (or certify, verify or state) under penalty of perjury under the laws of the United States of America that this statement is true and correct to the best of my knowledge.

/s/ _____ Date:

Witnessed: _____ Date:

Page _____ of _____

Exhibit

**UNITED STATES OF AMERICA
DEPARTMENT OF LABOR
VETERANS' EMPLOYMENT AND TRAINING SERVICE**

SUBPOENA DUCES TECUM

TO: _____

*At the instance of the Regional Administrator for the Veterans' Employment and Training Service, U.S. Department of Labor, you are hereby required to appear before _____
_____,
an Officer of the Veterans' Employment and Training Service, U.S. Department of Labor, at _____
_____,
in the City of _____ on the _____ day of _____, at _____
o'clock of that day, in the matter of _____,
Case No.: _____.*

And you are hereby required to bring with you and produce at said time and place the following books, papers, and documents:

Described in items _____ through _____ in the ATTACHMENT hereto.

FAIL NOT AT YOUR PERIL



IN TESTIMONY WHEREOF, *the seal of the U.S. DEPARTMENT OF LABOR is affixed hereto, and the undersigned, the REGIONAL ADMINISTRATOR OF THE VETERANS' EMPLOYMENT AND TRAINING SERVICE, of said U.S. DEPARTMENT OF LABOR, has hereunto set his/her hand at _____, _____, this _____ day of _____, 20XX.*

Regional Administrator
Veterans' Employment and Training Service
UNITED STATES DEPARTMENT OF LABOR

NOTICE TO WITNESS-If claim is made for witness fee or mileage, this subpoena should accompany voucher.

**UNITED STATES OF AMERICA
DEPARTMENT OF LABOR
VETERANS' EMPLOYMENT AND TRAINING SERVICE**

SUBPOENA AD TESTIFICANDUM

TO: _____

*At the instance of the Regional Administrator for the Veterans' Employment and Training Service, U.S. Department of Labor, you are hereby required to appear before _____

an Officer of the Veterans' Employment and Training Service, U.S. Department of Labor, at _____

in the City of _____ on the _____ day of _____, at _____
o'clock of that day, in the matter of _____,
Case No.: _____.*

FAIL NOT AT YOUR PERIL



IN TESTIMONY WHEREOF, *the seal of the U.S. DEPARTMENT OF LABOR is affixed hereto, and the undersigned, the REGIONAL ADMINISTRATOR OF THE VETERANS' EMPLOYMENT AND TRAINING SERVICE, of said U.S. DEPARTMENT OF LABOR, has hereunto set his/her hand at _____, _____, this _____ day of _____, 20XX.*

Regional Administrator
Veterans' Employment and Training Service
UNITED STATES DEPARTMENT OF LABOR

NOTICE TO WITNESS-If claim is made for witness fee or mileage, this subpoena should accompany voucher.

RETURN OF SERVICE

*I hereby certify that a duplicate original of
the within subpoena was*

in person,
by leaving at principal office
or place of business, to wit:

duly served
(Indicate by check
method used.

on the person named herein on

(Month, day, year)

(Name of person making service)

(Official title)

*I certify that the person named herein was
in attendance as a witness at* _____

on _____
(Month, day or days, and year)

(Name of person certifying)

(Official title)



[Date]

[Employer Address]

Re: [Claimant Name]
[Case Number]

Dear [Employer Name],

As you are aware, the U.S. Department of Labor's Veterans' Employment and Training Service (VETS) is conducting an investigation of a potential violation of the Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA) (20 CFR Part 1002) by the (employer) as a result of a claim filed by Mr. (claimant). On (date), VETS sent you a certified letter requesting clarifying information (information) regarding Mr. (claimant)'s claim. To date, we have received no response from (employer).

We are again requesting a clarification/response to the information requested in our original letter (a copy of which is provided for your reference) to be received by this office no later than (date, bold). Without an employer's statement from the (employer), we are unable to make a determination of this case. In accordance with 20 Code of Federal Regulations (CFR) Part 1002, and based on the information we have gathered to date, it would appear that Mr. (claimant)'s claim has merit and lacking any information to the contrary, we would make such a determination.

This letter is being sent to inform you that (employer) is granted a final extension until 12:00pm (ET), (date, bold) to deliver to this office the requested **original** information and documentation to avoid the requirement for issuance of a subpoena. If the requested documentation and information is not received by that deadline, this office may have no other recourse than to pursue the issuance of a subpoena. *See* 38 USC §§ 4326(a) and 4326(b). Therefore, in preparation for this possibility, please provide the following information in order to complete the subpoena:

1. Your full name
2. The proper address to deliver the subpoena
3. The best time for delivery of the subpoena

Moreover, if no response is received from the (employer) by (deadline date), VETS may inform Mr. (claimant) of your lack of response at this time, and advise Mr. (claimant) of his statutory right to have his case immediately referred to the Attorney General for potential civil litigation.

If you have any questions, please feel free to contact me at [Investigator phone number].

Sincerely,

[Investigator Name]

[Investigator Title]

Exhibit 20: Sample Agreement Outline

In the case of (XXXX) , the EEEE, [EEEE's name], agrees to take the following actions:

Reinstate (XXXX) to a Machine Operator position at the wage rate of \$15.85 per hour effective February 27, 20XX;

Reinstate (XXXX) 's health insurance coverage effective (specify date);

Credit (XXXX) for all time spent in the military service and for the period from October 21, 20XX to February 27, 20XX, for pension and seniority purposes; and

Compensate (XXXX) \$4,500.00 for wages lost from October 21, 20XX to February 27, 20XX.

Settlement outlined above is relative only to rights and benefits arising from (XXXX) 's reemployment rights claim under the Uniformed Services Employment and Reemployment Rights Act of 1994 and its predecessor statutes.

Signature of EEEE

Signature of XXXX

Signature of Investigator

Date

Case Number

**Exhibit 21: Sample Attorney General/Office of Special Counsel
Referral Request Form**

REQUEST FOR REFERRAL TO THE
ATTORNEY GENERAL/OFFICE OF SPECIAL COUNSEL

Case Number: _____

Name of Employer: _____

I, _____ SSN: _____, do hereby request the Veterans' Employment and Training Service, U.S. Department of Labor, to refer my Uniformed Services Employment and Reemployment Rights Act (USERRA) claim to the Attorney General (AG) or Office of Special Counsel (OSC) [specify] for consideration of representation, and I request the AG/OSC [specify] intercede on my behalf by representing me in the United States courts or before the Merit Systems Protection Board (MSPB) to protect my USERRA Rights under the provisions of Chapter 43, Title 38, U.S.C. and/or related predecessor statute. I understand that my request for referral and representation pledges me to cooperate with the Solicitor of Labor, and the AG/OSC [specify], in prosecution of my claim and to give prompt notice of any change in my mailing address and/or telephone number.

Signature of Claimant

Address

Telephone No.

Date

EMAIL, FAX, or MAIL TO:
Veterans' Employment and Training Service
U.S. Department of Labor
ATTENTION: REFERRAL REQUEST
61 Forsyth St., S.W. – Room 6T85 Atlanta, GA 30303
FAX: (404) 562-2313
Email: USERRAReferral@dol.gov

Exhibit 22: Referral Advisory Letter to Employer _

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State, Zip Code**

Date

(EEEE)

Street Address

City, State, Zip Code

Re: (XXXX)

Case Number

Dear (EEEE):

This is to advise you that (XXXX)'s case against (EEEE) is being referred to the Attorney General/Office of Special Counsel [specify] for consideration of legal action. As you are aware, (XXXX) seeks reinstatement in [position] and consequent lost wages since the date of his application for reemployment, August 28, 20XX.

We regret that this matter could not be resolved to the satisfaction of the parties.

Sincerely,

Investigator's Name Investigator's
Title

cc: (XXXX)



Month Day, Year

Claimant Name
Claimant Street Address
Claimant City, State Zip Code

Re: *Claimant v. Employer*
USERRA Case No.: XX-20XX-XXXXXX-XX-X-R

In accordance with Section 4323 of Title 38, U.S.C., Chapter 43, your above-referenced claim was referred to the U.S. Department of Justice (DOJ) on Month Day, Year.

Future correspondence on this matter should be addressed to:

Silas Darden, Esq. - Director
Andrew Braniff, Esq. - Assistant Director
U.S. Department of Justice
Office of Justice Programs
Service Members and Veterans Initiative
810 Seventh Street, NW
Washington, DC 20531

DOJ will decide whether to provide legal representation to you, and that office must advise you in writing of its decision within 60 days after it receives the case from us, unless you agree to extend this deadline.

Sincerely,

RAVET Name
Regional Administrator



Month Day, Year

Claimant Name
Claimant Street Address
Claimant City, State Zip Code

Re: *Claimant v. Employer*
USERRA Case No.: XX-20XX-XXXXXX-XX-X-R

In accordance with Section 4324 of Title 38, U.S.C., Chapter 43, your above-referenced claim was referred to the U.S. Office of Special Counsel (OSC) on Month Day, Year.

Future correspondence on this matter should be addressed to:

Patrick Boulay, Esq.
Chief, USERRA Unit
U.S. Office of Special Counsel
1730 M Street, N.W., Suite 218
Washington, DC 20036-4505

OSC will decide whether to provide legal representation to you, and that office must advise you in writing of its decision within 60 days after it receives the case from us, unless you agree to extend this deadline.

Sincerely,

RAVET Name
Regional Administrator



Month Day, Year

Claimant Name

Claimant Street Address

Claimant City, State Zip Code

RE: *Claimant v. Employer*

USERRA Case No. XX-20XX-XXXXX-XX-X-R

Dear Mr. Claimant:

This is to advise you that the Veterans' Employment and Training Service (VETS) is treating the continued involvement of an outside party in attempting to resolve your above-referenced Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA) claim as a request to withdraw your application for assistance under 38 U.S.C. § 4322, to refer your claim to the U.S. Department of Justice under 38 U.S.C. § 4323 or U.S. Office of Special Counsel under 38 U.S.C. § 4324 (choose one). Accordingly, VETS is closing your case as of this date.

Should you decide that you would like VETS to investigate the allegations, and to exercise any right you may have to have your claim referred to the U.S. Department or Justice or Office of Special Counsel (choose one), you will need to contact this office and request that we reopen your claim.

You have the right to seek private counsel at your own expense, or to file an appeal against your employer (or the Office of Personnel Management) directly to the Merit Systems Protection Board (MSPB). The MSPB encourages appellants to file a USERRA appeal as soon as possible after the date of the alleged violation. See 5 CFR 1208.12.

Sincerely,

Investigator's Name

Investigator



COPY via e-mail to

ORIGINAL via authorized carrier/delivery notification requested

Date

Name/Address

RE: Claimant

Case#

Dear:

This letter is a follow-up to this office's *Date opening letter delivered via e-mail and U.S. mail (see attached/enclosed) as well as additional correspondence sent (or telephone calls) to you on *Date (as applicable). You have not responded to our inquiries. As noted in our (opening letter date) letter, your cooperation with our investigation is imperative to completion of a timely and objective evaluation of your claim.

Due to your failure to cooperate in the investigation of your claim, closure of your case is being considered. If, by *Date , you have not provided to this office the previously-requested information/documentation required to continue with the investigation of your case, we will conclude that you no longer wish to pursue your claim, and the case will be closed administratively due to your lack of response.

Sincerely,

From

Enclosure

Exhibit 28A: Sample Closing Letter to Non-Federal Claimant – Lack of Interest

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State, Zip Code**

Date

(XXXX)

Street Address

City, State, Zip Code

Re: (XXXX)

DC-20XX-XXXXXX-XX-X

Dear (XXXX):

This is to advise you that the Veterans' Employment and Training Service (VETS) is treating your failure to respond to our February 1, 20XX certified letter/overnight carrier as a request to withdraw your application for assistance pursuant to section 4322(a) of the Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA). Accordingly, VETS is closing your case as of this date. Should you decide that you would like VETS to investigate your allegations, and to exercise any right you may have to have your claim referred to the Attorney General, you will need to contact this office and request that we reopen your claim.

You have the right to seek private counsel at your own expense or to file a lawsuit against the (Employer or Abbreviated Employer) in a court of competent jurisdiction.

Sincerely,

Investigator's Name

Investigator's Title

Encl: Certified Letter/overnight carrier dated February 1, 20XX

Exhibit 28B: Sample Closing Letter to Federal Claimant – Lack of Interest

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State, Zip Code**

Date

(XXXX)

Street Address

City, State, Zip Code

Re: (XXXX)

DC-20XX-XXXXXX-XX-X

Dear (XXXX):

This is to advise you that the Veterans' Employment and Training Service (VETS) is treating your failure to respond to our February 1, 20XX certified letter/overnight carrier as a request to withdraw your application for assistance pursuant to section 4322(a) of the Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA). Accordingly, VETS is closing your case as of this date. Should you decide that you would like VETS to investigate your allegations, and to exercise any right you may have to have your claim referred to the Office of Special Counsel, you will need to contact this office and request that we reopen your claim.

You have the right to seek private counsel at your own expense, or to file an appeal against the (Agency or Abbreviated Agency Name) (or the Office of Personnel Management) directly to the Merit Systems Protection Board (MSPB). The MSPB encourages appellants to file a USERRA appeal as soon as possible after the date of the alleged violation. *See* 5 C.F.R. 1208.12.

Sincerely,

Investigator's Name

Investigator's Title

Encl: Certified Letter/overnight carrier dated February 1, 20XX

Exhibit 29: Sample Closing Letter to Employer – No Response from Claimant

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State, Zip Code**

Date

EEEE

District Manager
Employer's Street
Address City, State,
Zip Code

Re: (XXXX)
Case Number

Dear EEEE:

Our investigation of the above-referenced case has been concluded, and we are closing our file in this matter.

We wish to thank you for your assistance and cooperation.

Sincerely,

Investigator's
Name
Investigator's
Title

cc: . (XXXXXXXX)

Exhibit 30: Sample Closing Letter to Non-Federal Claimant –Third Party Representation

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State, Zip Code**

Date

(XXXX)

Claimant's Street
Address City,
State, Zip Code

Re: (XXXX)

DC-20XX-XXXXXX-XX-X

Dear (XXXX):

This is to advise you that the Veterans' Employment and Training Service (VETS) is treating the continued involvement of an outside party in attempting to resolve your Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA) claim as a request to withdraw your application for assistance pursuant to 38 U.S.C. § 4322(a). Accordingly, VETS is closing your case as of this date. Should you decide that you would like VETS to investigate your allegations, and to exercise any right you may have to have your claim referred to the Attorney General, you will need to contact this office and request that we reopen your claim.

You have the right to seek private counsel at your own expense, or to file a lawsuit against the (Employer or Abbreviated Employer) in a court of competent jurisdiction.

Sincerely,

Investigator's Name

Investigator's Title

Exhibit 31: Sample Closing Letter to Federal Claimant –Third Party Representation
(Back to Text)

U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State, Zip Code

Date

(XXXX)

Claimant's Street
Address City, State,
Zip Code

Re: (XXXX)
DC-20XX-XXXXXX-XX-X

Dear (XXXX):

This is to advise you that the Veterans' Employment and Training Service (VETS) is treating the continued involvement of an outside party in attempting to resolve your Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA) claim as a request to withdraw your application for assistance pursuant to 38 U.S.C. § 4322(a). Accordingly, VETS is closing your case as of this date. Should you decide that you would like VETS to investigate your allegations, and to exercise any right you may have to have your claim referred to the Office of Special Counsel, you will need to contact this office and request that we reopen your claim.

You have the right to seek private counsel at your own expense, or to file an appeal against the (Agency or Abbreviated Agency Name) (or the Office of Personnel Management) directly to the Merit Systems Protection Board (MSPB). The MSPB encourages appellants to file a USERRA appeal as soon as possible after the date of the alleged violation. *See* 5 CFR 1208.12.

Sincerely,

Investigator's Name
Investigator's Title

Exhibit 32: Sample Letter to Employer Requesting Payment – Claim Granted

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State, Zip Code**

Date

EEEE

Compensation Manager
Employer's Street Address
City, State, Zip Code

Re: (XXXX)
Case Number

Dear EEEE:

This confirms our November 19, 20XX telephone conversation regarding (XXXX) case under the Uniformed Services Employment and Reemployment Rights Act (USERRA), 38 U.S.C. 4301- 4335.

On that date you stated that (XXXX) will be advanced to Step #10 of the pay scale, presently \$16.50 per hour, retroactive to May 12, 20XX, and that she will receive \$1,650.00 in back pay. Please forward a check in that amount, payable to (XXXX), to this office by [date] and we will forward the check to (XXXX). Additionally, you have agreed that she will receive military service credit for all benefits accruing from seniority, including pension.

Based on satisfactory resolution, this case is being closed. We greatly appreciate your cooperation in resolving this matter.

Sincerely,

Investigator's Name
Investigator's Title

cc: . (XXXX)

Exhibit 33: Sample Settlement Agreement and Release Form

**APPENDIX B-3
REVISED USERRA SETTLEMENT AGREEMENT AND RELEASE
EXAMPLE**

**NOTE: DO NOT USE AGENCY/OFFICE LETTERHEAD WHEN DRAFTING
SETTLEMENT AGREEMENT AND RELEASE DOCUMENT**

[NAME])	CASE NUMBER
Complainant)	SS-2013-00001-10-R
v.)	
[EMPLOYER])	
Respondent)	

SETTLEMENT AGREEMENT AND RELEASE

This SETTLEMENT AGREEMENT and RELEASE is made and entered into between [Claimant Name] (Complainant) and [Employer] (Respondent), who agree and stipulate as follows:

WHEREAS, [Claimant Name] has filed a claim with the United States Department of Labor, Veterans' Employment and Training Service, alleging that he was denied initial employment

on or about [Month Day, Year], in violation of Section 4311 of the Uniformed Services Employment and

Reemployment Rights Act, 38, U.S.C. § 4301, et. seq; and

WHEREAS the Respondent denies allegation of denial of initial employment in violation of aforementioned Act; and

WHEREAS, the Complainant has a claim for proper employment with Respondent; and

WHEREAS, both parties now wish to settle this case without the necessity of litigation;

NOW, THEREFORE, in consideration of the mutual covenants hereinafter contained, the sufficiency of which is hereby acknowledged, the parties hereto agree as follows:

- A. Respondent agrees to review Complainant's application and amended documentation to determine

eligibility for position to which initially applied [position].

- B. The Respondent agrees to employ the Complainant into the [agreed-to position] position in [location / City, State], upon successful completion of all training and other on-boarding requirements.

- C. The Complainant agrees to have VETS Case No. [SS-2013-00001-10-R] closed as identified above

and agrees not to institute or pursue any civil action under the Uniformed Services Employment and

Reemployment Rights Act of 1994 against the Respondent, its agents, employees or successors as a result of

his alleged denial for reemployment.

- D. Failure to comply with the terms of this agreement authorizes the claimant to request the Veterans'

Employment and Training Service re-open the case for further investigation or to seek private counsel in

resolving this dispute.

- E. It is understood that this agreement does not constitute and shall not be construed as an admission

of liability or wrongdoing by the agency with respect to the appellant's claims.

- F. The terms and facts of settlement are generally confidential; However, nothing in this Agreement is

intended to or shall prevent, impede or interfere with Complainant providing truthful testimony and

information in the course of an investigation or proceeding authorized by law and conducted by an agency

of the United States.

EMPLOYER

[CLAIMANT NAME]

By: _____

By: _____

Dated: _____

Dated: _____

Exhibit 34: Sample Closing Letter to Claimant – Claim Granted/Settled_(Back to Text)

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State, Zip Code**

Send via Certified Mail/overnight carrier-delivery notification requested

Date

(XXXX)

Claimant's Street Address City,
State, Zip Code

Re: (XXXX)

Case Number

Dear. (XXXX):

Enclosed is a check in the amount of \$10,999.07 from EEEE in payment for total withdrawal of your Thrift Plan.

This payment, along with the previous back pay award of \$3,000.00 finalizes resolution of your USERRA claim against EEEE. Therefore, your case is closed this date.

A copy of your signed release is also enclosed. Sincerely,

Investigator's Name

Investigator's Title

Enclosures

Exhibit 35: Sample Closing Letter to Employer – Claim Settled

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State, Zip Code**

Date

EEEE

General Counsel

Employer's Street Address

City, State, Zip Code

Re: (XXXX)

Case Number

Dear EEEE:

Enclosed is the release signed by (XXXX) in settlement of the claim in this case. The check you provided has been sent by certified mail/overnight carrier to (XXXX), and the signature on the release indicates satisfaction.

Thank you for your cooperation and attention. Our file on this case is now closed.

Sincerely,

Investigator's Name

Investigator's Title

cc: (XXXX)

Enclosure

Exhibit 36: Sample Closing Letter to Non-Federal Claimant – Claim Withdrawn

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State, Zip Code**

Date

(XXXX)

Claimant's Street
Address City, State,
Zip Code

Re: (XXXX)

DC-20XX-XXXXXX-XX-X

Dear (XXXX):

In accordance with your August 23, 20XX written request to withdraw your application for assistance pursuant to 38 U.S.C. § 4322(a) (your Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA) claim), the Veterans' Employment and Training Service (VETS) is closing your case this date. Should you change your mind and decide that you would like VETS to investigate your allegations, and to exercise any right you may have to have your claim referred to the Attorney General, you will need to contact this office and request that we reopen your claim.

You have the right to seek private counsel at your own expense, or to file a lawsuit against the (Employer or Abbreviated Employer) in a court of competent jurisdiction.

Sincerely,

Investigator's Name

Investigator's Title

Exhibit 37: Sample Closing Letter to Federal Claimant – Claim Withdrawn

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State, Zip Code**

Date

(XXXX)

Claimant's Street
Address City, State,
Zip Code

Re: (XXXX)
DC-20XX-XXXXXX-XX-X

Dear (XXXX) :

In accordance with your August 23, 20XX written request to withdraw your application for assistance pursuant to section 4322(a) of the Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA), the Veterans' Employment and Training Service (VETS) is closing your case this date. Should you change your mind and decide that you would like VETS to investigate your allegations, and to exercise any right you may have to have your claim referred to the Office of Special Counsel, you will need to contact this office and request that we reopen your claim.

You have the right to seek private counsel at your own expense, or to file an appeal against the (Agency or Abbreviated Agency Name) (or the Office of Personnel Management) directly to the Merit Systems Protection Board (MSPB). The MSPB encourages appellants to file a USERRA appeal as soon as possible after the date of the alleged violation. *See* 5 CFR 1208.12.

Sincerely,

Investigator's Name

Investigator's Title

Exhibit 38: Sample Closing Letter to Employer – Claim Withdrawn

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State, Zip Code**

Date

EEEE

District Manager

Employer's Street

Address City, State,

Zip Code

Re: (XXXX)

DC-20XX-XXXXXX-XX-X

Dear EEEE:

This is to inform you that (XXXX) has advised us that he does not wish to pursue the above-referenced claim under the Uniformed Services Employment and Reemployment Rights Act (USERRA) any further. Therefore, we are closing our file on the matter.

Sincerely,

Investigator's Name

Investigator's Title

cc: . (XXXX)

Exhibit 39: Sample Closing Letter to Federal Claimant – Not Eligible

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State, Zip Code**

***Send via overnight carrier- identify authorized carrier delivery notification requested**

Date

(XXXX)

Claimant's Street Address

City, State Zip Code

Re: (XXXX)

Case Number

Dear . (XXXX)

This agency has compiled and reviewed facts related to your claim against (Agency or Abbreviated Agency Name) (or Office of Personnel Management) under the Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA). Based on the information we have compiled, we have found you not eligible for (TYPE OF RELIEF SOUGHT) under USERRA.

In making the above determination, the investigator reviewed (specify documentation reviewed that supported a finding of not eligible). If you have any evidence to refute this finding, please contact this office so that we can discuss that evidence.

You have a right to request referral of your claim to the Office of Special Counsel (OSC). If OSC is reasonably satisfied that you are entitled to the relief sought, the Special Counsel may appear on your behalf and initiate an action regarding your complaint before the Merit Systems Protection Board (MSPB). You also have the right to seek private counsel at your own expense, or to file a complaint against the (Agency or Abbreviated Agency Name) (or Office of Personnel Management) directly to the MSPB.

If you elect to have your claim referred, you must send VETS a written referral request. The request must include your name, address, phone number, name of employer and your USERRA case number (provided above). We recommend you mail or fax your referral request at your earliest convenience. **IMPORTANT NOTE:** Referral requests **must** be sent to the address below, **not** to your investigator. Referral requests are sent to:

Veterans' Employment and Training Service
U.S. Department of Labor

ATTENTION: REFERRAL REQUEST

61 Forsyth St., S.W. – Room 6T85

Atlanta, GA 30303

FAX: (404) 562-2313

Email: USERRAReferral@dol.gov

Please contact us if you would like any additional information on this matter.

Sincerely,

Investigator's Name and Title

Exhibit 40: Sample Closing Letter to Non-Federal Claimant – Not Eligible

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State, Zip Code**

***Send via overnight carrier- identify authorized carrier with delivery notification requested**

Date

(XXXX)

Claimant's Street Address

City, State Zip Code

Re: (XXXX)

Case Number

Dear (XXXX)

This agency has compiled and reviewed facts related to your claim against (Employer or Abbreviated Employer) under the Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA). Based on the information we have compiled, we have found you not eligible for (TYPE OF RELIEF SOUGHT) under USERRA.

In making the above determination, the investigator reviewed (specify documentation reviewed that supported a finding of not eligible). If you have any evidence to refute this finding, please contact this office so that we can discuss that evidence.

You have the right to request a referral of your claim to the U.S. Attorney General. If the Attorney General is reasonably satisfied that you are entitled to the relief sought, the Attorney General may appear on your behalf and initiate an action regarding your complaint before a district court of the United States. You also have the right to seek private counsel at your own expense, or to file a lawsuit against the employer in a court of competent jurisdiction.

If you elect to have your claim referred, you must send VETS a written referral request. The request must include your name, address, phone number, name of employer and your USERRA case number (provided above). We recommend you mail or fax your referral request at your earliest convenience. **IMPORTANT NOTE:** Referral requests **must** be sent to the address below, **not** to your investigator. Referral requests are sent to:

Veterans' Employment and Training Service
U.S. Department of Labor
ATTENTION: REFERRAL REQUEST
61 Forsyth St., S.W. – Room 6T85
Atlanta, GA 30303

FAX: (404) 562-2313

Email: USERRAReferral@dol.gov

Please contact us if you would like any additional information on this matter.

Sincerely,

Investigator's Name and Title

Exhibit 41: Sample Closing Letter to Federal Claimant---No Merit

**U.S. Department of Labor Veterans'
Employment and Training Service
Street Address City,
State, Zip Code**

***Send via overnight carrier- identify authorized carrier with delivery notification requested**

Date

(XXXX)

Claimant's Street Address

City, State Zip Code

Re: (XXXX)

Case Number

Dear (XXXX)

This agency has investigated your claim against (Agency or Abbreviated Agency Name) (or the Office of Personnel Management) under the Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA). Based on the information obtained during the investigation, we do not find that the evidence supports a violation of USERRA.

You have a right to request referral of your claim to the Office of Special Counsel (OSC) for further review. If OSC is reasonably satisfied that you are entitled to the relief sought, the Special Counsel may appear on your behalf and initiate an action regarding your complaint before the Merit Systems Protection Board (MSPB).

If you elect to have your claim referred, you must send VETS a written referral request. The request must include your name, address, phone number, name of employer and your USERRA case number (provided above). We recommend you mail or fax your referral request at your earliest convenience. **IMPORTANT NOTE:** Referral requests **must** be sent to the address below, **not** to your investigator. Referral requests are sent to:

Veterans' Employment and Training Service

U.S. Department of Labor

ATTENTION: REFERRAL REQUEST

61 Forsyth St., S.W. – Room 6T85

Atlanta, GA 30303

FAX: (404) 562-2313

Email: USERRAReferral@dol.gov

You have the right to seek private counsel at your own expense, or to file an appeal against (Agency or Abbreviated Agency Name) (or the Office of Personnel Management) directly to the MSPB. The MSPB encourages appellants to file a USERRA appeal as soon as possible after the date of the alleged violation. *See* 5 CFR 1208.12.

Please contact us if you would like any additional information on this matter. Sincerely,

Investigator's Name and Title

Exhibit 42: Sample Closing Letter to Non-Federal Claimant—No Merit

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State, Zip Code**

***Send via overnight carrier- identify authorized carrier with delivery notification requested**

Date

(XXXX)

Claimant's Street Address City, State Zip Code

Re: (XXXX)

Case Number

Dear . (XXXX)

This agency has investigated your claim against (Employer or Abbreviated Employer) under the Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA). Based on the information obtained during the investigation, we do not find that the evidence supports a violation of USERRA.

You have the right to request a referral of your claim to the U.S. Attorney General. If the Attorney General is reasonably satisfied that you are entitled to the relief sought, the Attorney General may appear on your behalf and initiate an action regarding your complaint before a district court of the United States.

If you elect to have your claim referred, you must send VETS a written referral request. The request must include your name, address, phone number, name of employer and your USERRA case number (provided above). We recommend you mail or fax your referral request at your earliest convenience. **IMPORTANT NOTE:** Referral requests **must** be sent to the address below, **not** to your investigator. Referral requests are sent to:

Veterans' Employment and Training Service
U.S. Department of Labor
ATTENTION: REFERRAL REQUEST
61 Forsyth St., S.W. – Room 6T85 Atlanta, GA 30303
FAX: (404) 562-2313
Email: USERRAReferral@dol.gov

You have the right to seek private counsel at your own expense, or to file a lawsuit against (Employer or Abbreviated Employer) in a court of competent jurisdiction.

Please contact us if you would like any additional information on this matter.

Sincerely,

Investigator's Name and Title

Exhibit 43: Sample Closing letter to Employer (No Merit)

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State, Zip Code**

Date

EEEE

General Counsel

Employer's Street Address

City, State, Zip Code

Re: (XXXX)

Case Number

Dear EEEE:

Our investigation of the above-referenced case has been concluded, and we are closing our file in this matter. XXXX retains the right to have this claim referred to (AG/OSC) for consideration of representation. We will inform you should XXXX request such referral.

We wish to thank you for your assistance and cooperation.

Sincerely,

Investigator's Name
and Title

Exhibit 44: Sample Closing Letter to Non-Federal Employer – Merit, Not Resolved

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State, Zip Code**

EEEE

Employer's Street Address City,
State, Zip Code

Re: (XXXX)

Case Number

Dear EEEE:

The Veterans' Employment and Training Service (VETS) has completed its investigation of the above-referenced complaint filed against (employer) by (claimant) under the Uniformed Services Employment and Reemployment Rights Act (USERRA), 38 U.S.C. §§ 4301-4335. As a result of the investigation, we have determined that the evidence supports (claimant's) allegations enumerated below.

(Claimant's) allegations were [specify each allegation]. (Employer's) position with respect to the allegations is [specify each employer position].

Based on the facts, as determined in our investigation, and the application of the law to the facts, it is VETS' position that (claimant's) allegations are meritorious. Specifically, we find that (employer) is not in compliance with: [insert cites from 38 U.S.C./20 C.F.R.]. Accordingly, we believe (claimant) is entitled to the following relief afforded under USERRA: [insert remedies]. Granting this relief would bring (employer) into compliance with USERRA.

We have unfortunately been unable to reach a satisfactory resolution to this matter, and have advised (claimant) of our findings. (Claimant) has been further advised that s/he may request that the case be referred to the U.S. Attorney General for further review and possible representation. If the Attorney General is reasonably satisfied that (claimant) is entitled to the relief sought, the Justice Department may seek enforcement on the claimant's behalf, by initiating legal proceedings in U.S. district court. We have also advised (claimant) that s/he may continue to pursue the matter through private counsel in a court of competent jurisdiction.

In the meantime, if VETS may assist in resolving this issue amicably between (employer and claimant), we would be pleased to continue to work with you, subject to (claimant's) approval to reopen the case. Please be aware, however, that we have closed this case without resolution, and (claimant) may elect to continue to pursue relief through referral to the Attorney General or with private counsel.

Please contact me as soon as possible at (phone, e-mail) if you wish to resume attempts to resolve this complaint.

Sincerely,

Investigator's Name

Investigator's Title

cc: . (claimant)

Exhibit 45: Sample Closing Letter to Federal Employer – Merit, Not Resolved

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State, Zip Code**

EEEE

Employer's Street Address
City, State, Zip Code

Re: (XXXX)
Case Number

Dear EEEE:

The Veterans' Employment and Training Service (VETS) has completed its investigation of the above- referenced complaint filed against (employer) by (claimant) under the Uniformed Services Employment and Reemployment Rights Act (USERRA), 38 U.S.C. §§ 4301-4335. As a result of the investigation, we have determined that the evidence supports (claimant's) allegations enumerated below.

(Claimant's) allegations were [specify each allegation]. (Employer's) position with respect to the allegations is [specify each employer position].

Based on the facts, as determined in our investigation, and the application of the law to the facts, it is VETS' position that (claimant's) allegations are meritorious. Specifically, we find that (employer) is not in compliance with: [insert cites from 38 U.S.C.]. Accordingly, we believe (claimant) is entitled to the following relief afforded under USERRA: [insert remedies]. Granting this relief would bring (employer) into compliance with USERRA.

We have unfortunately been unable to reach a satisfactory resolution to this matter, and have advised (claimant) of our findings. (Claimant) has been further advised that s/he may request that the case be referred to the Office of Special Counsel (OSC) for further review and possible representation. If the OSC is reasonably satisfied that (claimant) is entitled to the relief sought, the OSC may seek enforcement on the claimant's behalf, by initiating an action before the Merit Systems Protection Board (MSPB). We have also advised (claimant) that s/he may continue to pursue the matter through private counsel before the MSPB.

In the meantime, if VETS may assist in resolving this issue amicably between (employer and claimant), we would be pleased to continue to work with you, subject to (claimant's) approval to reopen the case. Please be aware, however, that we have closed this case without resolution, and (claimant) may elect to continue to pursue relief through referral to the OSC or with private counsel.

Please contact me as soon as possible at (phone, e-mail) if you wish to resume attempts to resolve

this complaint. Sincerely,

Investigator's Name

Investigator's Title

cc: . (claimant)

Exhibit 46: Sample Closing Letter to Federal Claimant – Merit, Not Resolved

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State Zip Code**

DATE

(XXXX)

Claimant's Street Address

City, State Zip Code

RE: (XXXX)

DC-20XX-XXXXXX-XX-X

Dear (XXXX)

We have completed our investigation of your USERRA complaint. As discussed with you on [date], we have found that the evidence reviewed during the course of our investigation supports your allegations with respect to X, Y, and Z.

We have been unable to obtain a satisfactory resolution of your complaint. We will therefore close your case effective [date].

You have the right to request that your case be referred to the Office of Special Counsel (OSC) for further review and possible representation. If OSC is reasonably satisfied that you are entitled to the relief sought, the Special Counsel may appear on your behalf and initiate an action regarding your complaint before the Merit Systems Protection Board (MSPB).

If you elect to have your claim referred, you must send VETS a written referral request. The request must include your name, address, phone number, name of employer and your USERRA case number (provided above). We recommend you mail or fax your referral request at your earliest convenience. **IMPORTANT NOTE:** Referral requests **must** be sent to the address below, **not** to your investigator. Referral requests are sent to:

Veterans' Employment and Training Service
U.S. Department of Labor
ATTENTION: REFERRAL REQUEST
61 Forsyth St., S.W. – Room 6T85 Atlanta,
GA 30303
FAX: (404) 562-2313
Email: USERRAreferral@dol.gov

You further have the right to seek private counsel at your own expense, or to file an appeal against the (Agency or Abbreviated Agency Name) (or the Office of Personnel Management) directly with the MSPB. The MSPB encourages appellants to file a USERRA appeal as soon as possible after the date of the alleged violation. *See* 5 CFR 1208.12.

Sincerely,

Investigator's Name

Investigator's Title

Exhibit 47: Sample Closing Letter to Non-Federal Claimant – Merit, Not Resolved

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State Zip Code**

DATE

(XXXX)

Claimant's Street Address

City, State Zip Code

RE: (XXXX)

DC-20XX-XXXXXX-XX-X

Dear (XXXX)

We have completed our investigation of your USERRA complaint. As discussed with you on [date], we have found that the evidence reviewed during the course of our investigation supports your allegations with respect to X, Y, and Z.

We have been unable to obtain a satisfactory resolution of your complaint. We will therefore close your case effective [date].

You have a right to request that your case be referred to the U.S. Attorney General for further review and possible representation. If the Attorney General is reasonably satisfied that you are entitled to the relief sought, the Attorney General may appear on your behalf and initiate an action regarding your complaint before a district court of the United States.

If you elect to have your claim referred, you must send VETS a written referral request. The request must include your name, address, phone number, name of employer and your USERRA case number (provided above). We recommend you mail or fax your referral request at your earliest convenience. **IMPORTANT NOTE:** Referral requests **must** be sent to the address below, **not** to your investigator. Referral requests are sent to:

Veterans' Employment and Training Service

U.S. Department of Labor

ATTENTION: REFERRAL REQUEST

61 Forsyth St., S.W. – Room 6T85 Atlanta, GA 30303

FAX: (404) 562-2313

Email: USERRAReferral@dol.gov

You further have the right to seek private counsel at your own expense, or to pursue the claim on your own behalf in a court having competent jurisdiction over the matter.

Sincerely,

Investigator's Name Investigator's Title

Exhibit 48: Sample Closing Letter to Federal Claimant – Merit Undetermined

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State Zip Code**

DATE

(XXXX)

Claimant's Street Address

City, State Zip Code

RE: (XXXX)

DC-20XX-XXXXXX-XX-X

Dear (XXXX),

We have been unable to complete our investigation of your USERRA complaint within the time deadlines established by Public Law 110-389, the Veterans' Benefits Improvement Act of 2008. As you have not granted an extension of time needed to allow us to complete our investigation, we must close your case effective [date 90-day limit is reached].

You have a right to request that your case be referred to the Office of Special Counsel (OSC) for further review and possible representation. If OSC is reasonably satisfied that you are entitled to the relief sought, the Special Counsel may appear on your behalf and initiate an action regarding your complaint before the Merit Systems Protection Board (MSPB).

If you elect to have your claim referred, you must send VETS a written referral request. The request must include your name, address, phone number, name of employer and your USERRA case number (provided above). We recommend you mail or fax your referral request at your earliest convenience. **IMPORTANT NOTE:** Referral requests **must** be sent to the address below, **not** to your investigator. Referral requests are sent to:

Veterans' Employment and Training Service
U.S. Department of Labor
ATTENTION: REFERRAL REQUEST
61 Forsyth St., S.W. – Room 6T85 Atlanta, GA 30303
FAX: (404) 562-2313
Email: USERRAReferral@dol.gov

You further have the right to seek private counsel at your own expense, or to file an appeal against the (Agency or Abbreviated Agency Name) (or the Office of Personnel Management) directly with the MSPB. The MSPB encourages appellants to file a USERRA appeal as soon as possible after the date of the alleged violation. *See* 5 CFR 1208.12.

Sincerely,

Investigator's Name
Investigator's Title

Exhibit 49: Sample Cosing Letter to Non-Federal Claimant – Merit Undetermined

**U.S. Department of Labor
Veterans' Employment and Training Service
Street Address
City, State Zip Code**

DATE

(XXXX)
Claimant's Street Address
City, State Zip Code

RE: (XXXX)
DC-20XX-XXXXXX-XX-X Dear (XXXX)

We have been unable to complete our investigation of your USERRA complaint within the time deadlines established by Public Law 110-389, the Veterans' Benefits Improvement Act of 2008. As you have not granted an extension of time needed to allow us to complete our investigation, we must close your case effective [date 90-day limit is reached].

You have the right to request that your case be referred to the U.S. Attorney General for further review and possible representation. If the Attorney General is reasonably satisfied that you are entitled to the relief sought, the Attorney General may appear on your behalf and initiate an action regarding your complaint before a district court of the United States.

If you elect to have your claim referred, you must send VETS a written referral request. The request must include your name, address, phone number, name of employer and your USERRA case number (provided above). We recommend you mail or fax your referral request at your earliest convenience. **IMPORTANT NOTE:** Referral requests **must** be sent to the address below, **not** to your investigator. Referral requests are sent to:

Veterans' Employment and Training Service
U.S. Department of Labor
ATTENTION: REFERRAL REQUEST
61 Forsyth St., S.W. – Room 6T85 Atlanta, GA 30303
FAX: (404) 562-2313
Email: USERRAReferral@dol.gov

You further have the right to seek private counsel at your own expense, or to pursue the claim on your

own behalf in a court having competent jurisdiction over the matter. Sincerely,

Investigator's Name Investigator's Title

Exhibit 51 (USERRA Tools)

These web-based resources are for Investigator use; the images and associated links are recommended to enhance research, statute based technical assistance and outreach.



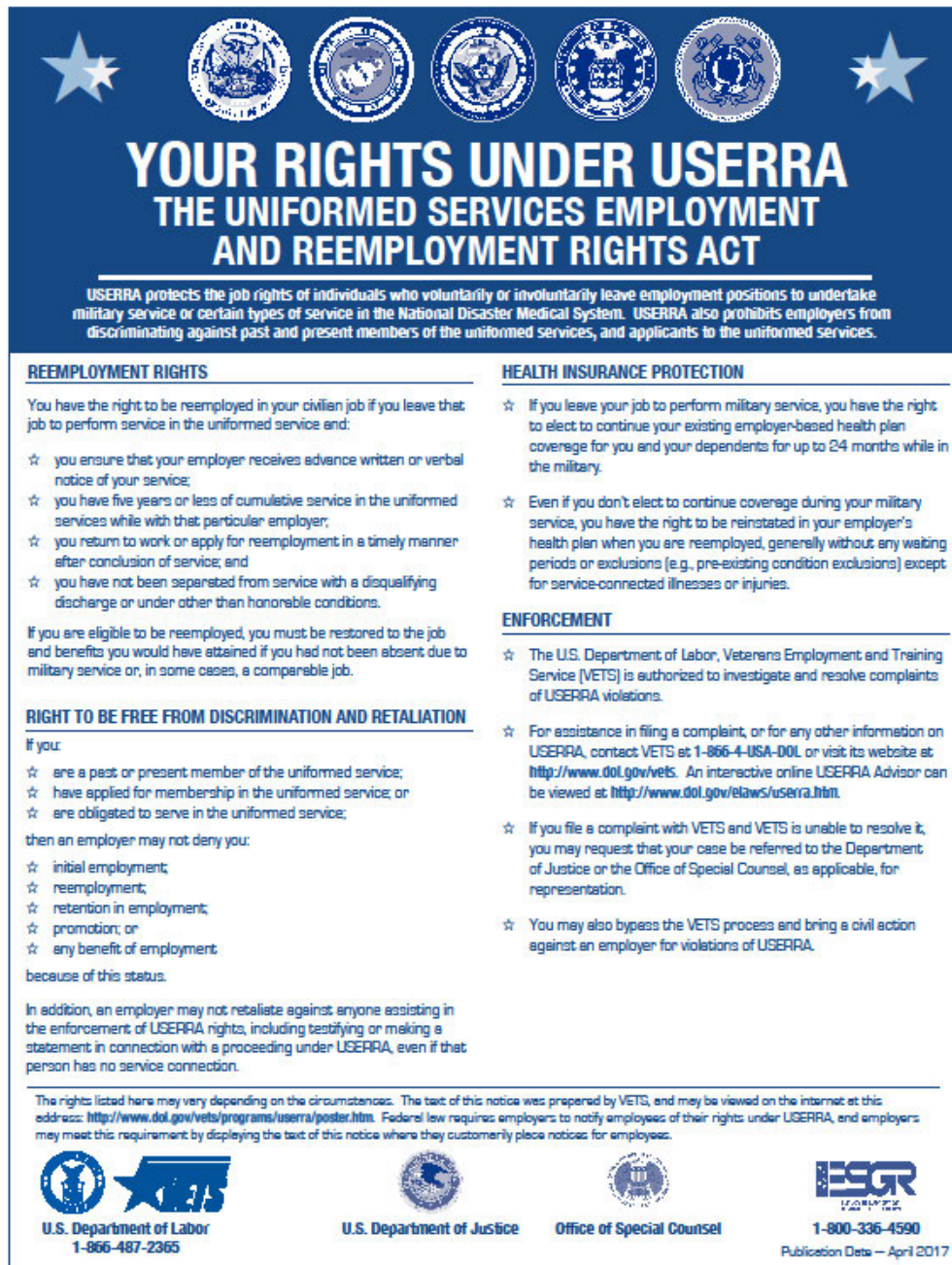
Career ONESTOP



Federal Employment

Career ONESTOP and USAJOBS are the recommended resources for any veteran claimant requiring assistance in careers searches, education, training, resumes, interviews, salaries, benefits, job searches, state-employment assistance, and other relevant veteran resources.

Exhibit 52 (USERRA Poster) (Back to Text)



The poster features a dark blue background with five circular emblems at the top, flanked by two white stars. The main title is in large, bold, white letters. Below the title is a summary of the act's purpose. The content is organized into four columns: REEMPLOYMENT RIGHTS, HEALTH INSURANCE PROTECTION, RIGHT TO BE FREE FROM DISCRIMINATION AND RETALIATION, and ENFORCEMENT. Each column contains specific rights and procedures, marked with star icons. At the bottom, there are logos for the U.S. Department of Labor, U.S. Department of Justice Office of Special Counsel, and EESGR, along with contact information and a publication date.

YOUR RIGHTS UNDER USERRA THE UNIFORMED SERVICES EMPLOYMENT AND REEMPLOYMENT RIGHTS ACT

USERRA protects the job rights of individuals who voluntarily or involuntarily leave employment positions to undertake military service or certain types of service in the National Disaster Medical System. USERRA also prohibits employers from discriminating against past and present members of the uniformed services, and applicants to the uniformed services.

REEMPLOYMENT RIGHTS

You have the right to be reemployed in your civilian job if you leave that job to perform service in the uniformed service and:

- ☆ you ensure that your employer receives advance written or verbal notice of your service;
- ☆ you have five years or less of cumulative service in the uniformed services while with that particular employer;
- ☆ you return to work or apply for reemployment in a timely manner after conclusion of service; and
- ☆ you have not been separated from service with a disqualifying discharge or under other than honorable conditions.

If you are eligible to be reemployed, you must be restored to the job and benefits you would have attained if you had not been absent due to military service or, in some cases, a comparable job.

HEALTH INSURANCE PROTECTION

- ☆ If you leave your job to perform military service, you have the right to elect to continue your existing employer-based health plan coverage for you and your dependents for up to 24 months while in the military.
- ☆ Even if you don't elect to continue coverage during your military service, you have the right to be reinstated in your employer's health plan when you are reemployed, generally without any waiting periods or exclusions (e.g., pre-existing condition exclusions) except for service-connected illnesses or injuries.

RIGHT TO BE FREE FROM DISCRIMINATION AND RETALIATION

If you:

- ☆ are a past or present member of the uniformed service;
- ☆ have applied for membership in the uniformed service; or
- ☆ are obligated to serve in the uniformed service;

then an employer may not deny you:

- ☆ initial employment;
- ☆ reemployment;
- ☆ retention in employment;
- ☆ promotion; or
- ☆ any benefit of employment



because of this status.


In addition, an employer may not retaliate against anyone assisting in the enforcement of USERRA rights, including testifying or making a statement in connection with a proceeding under USERRA, even if that person has no service connection.


ENFORCEMENT


- ☆ The U.S. Department of Labor, Veterans Employment and Training Service (VETS) is authorized to investigate and resolve complaints of USERRA violations.
- ☆ For assistance in filing a complaint, or for any other information on USERRA, contact VETS at 1-866-4-USA-DOL or visit its website at <http://www.dol.gov/vets>. An interactive online USERRA Advisor can be viewed at <http://www.dol.gov/elaws/userra.html>.
- ☆ If you file a complaint with VETS and VETS is unable to resolve it, you may request that your case be referred to the Department of Justice or the Office of Special Counsel, as applicable, for representation.
- ☆ You may also bypass the VETS process and bring a civil action against an employer for violations of USERRA.

The rights listed here may vary depending on the circumstances. The text of this notice was prepared by VETS, and may be viewed on the internet at this address: <http://www.dol.gov/vets/programs/userra/poster.htm>. Federal law requires employers to notify employees of their rights under USERRA, and employers may meet this requirement by displaying the text of this notice where they customarily place notices for employees.

 
U.S. Department of Labor
1-866-487-2365


U.S. Department of Justice


Office of Special Counsel


EESGR
1-800-336-4590
Publication Date — April 2017

The following language is recommended to supplement all technical assistance requests regarding the USERRA Poster...

The USERRA rights notice poster is available on our website at: https://www.dol.gov/vets/programs/userra/USERRA_Private.pdf for downloading and printing free of charge.

Exhibit 54 (Thrift Savings FACT SHEET) (Back to Text)



TSP Benefits That Apply to Members of the Military Who Return to Federal Civilian Service

This fact sheet applies to you if you meet all of the following conditions:

- You were separated from Federal civilian service to perform military service or were placed in nonpay status to perform military service;
- Your release from military service, discharge from hospitalization, or other similar event occurred on or after August 2, 1990; and
- You were subsequently reemployed in, or restored to, a position covered by FERS or CSRS pursuant to 38 U.S.C. Chapter 43.¹

The Uniformed Services Employment and Re-employment Rights Act of 1994 (USERRA) contains several provisions regarding the Thrift Savings Plan (TSP):

- You may make up TSP contributions missed as a result of your military service.
- If you were not vested when you separated from civilian service, and Agency Automatic (1%) Contributions and attributable earnings were removed from your TSP account, you are entitled to have these funds restored to your account.
- If you separated from civilian service and your TSP account was paid to you as an automatic cashout, you may return the funds, and, if applicable, reestablish a TSP loan.

This fact sheet explains each of these benefits. For an explanation of how they relate to your specific situation and more information, see your personnel office.

Making Up TSP Contributions

You may make up contributions to your civilian TSP account for the period of time you missed as a result of your military service. The amount of these contributions will be determined by your TSP contribution election that was in effect immediately before your entry into military service. However, you may also make a retroactive contribution election to terminate the contributions or retroactive contribution election(s) for any open season that occurred during this period. If you had made an election to terminate contributions within two months before your entry into military service, you may make a contribution election for the first open season that occurred after the termination election was effective, even if the termination was made outside an open season.

If you contributed to the TSP during your period of military service, the amount of employee contributions that you may make up must be reduced by the amount of the employee contributions you made to your uniformed services account.

¹ FERS refers to the Federal Employees' Retirement System, the Foreign Service Pension System, and other equivalent Federal retirement systems. CSRS refers to the Civil Service Retirement System, including CSRS Offset, the Foreign Service Retirement and Disability System, and other equivalent Federal retirement systems.

The following language is recommended to supplement all Thrift Savings Plan requests for assistance...

"...We will not be able to address the issue with your Thrift Savings Plan (TSP) contributions. USERRA does not give VETS authority to investigate complaints concerning TSP. Section 4322(f) of the statute provides: "This subchapter does not apply to any action relating to benefits to be provided under the Thrift Savings Plan under title 5."
TSP-related complaints should be addressed, in writing, to the Federal Retirement Thrift Investment Board, Office of External Affairs, 1250 H Street, NW, Washington, DC 20005, (202) 942-1450 or (202) 942-1460.

Please see attached "Thrift Savings Plan Fact Sheet" for additional information.



COPY via e-mail to
ORIGINAL via certified U. S. Mail

Date

Name/Address

RE: Claimant
Case#

Dear:

This is to advise you that the Veterans' Employment and Training Service (VETS) is treating **your Parallel State Court Proceeding** to resolve your Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA) claim as a request to withdraw your application for assistance pursuant to 38 U.S.C. § 4322(a). Accordingly, VETS is closing your case as of this date. Should you decide that you would like VETS to investigate your allegations, and to exercise any right you may have to have your claim referred to the Attorney General, you will need to contact this office and request that we reopen your claim.

Sincerely,

From

EXECUTIVE BRANCH CHIEF HUMAN CAPITAL OFFICERS

Office of Personnel Management

Chief Human Capital Officer
900 E Street, N.W., Suite 5H09
Washington, DC 20415
Phone: 202-606-1000/Fax: 202-606-4489

Department of Agriculture

Chief Human Capital Officer
1400 Independence Avenue, S.W., Room 209A
Washington, DC 20250
Phone: 202-720-3291/Fax: 202-720-2191

Department of Commerce

Chief Human Capital Officer
14th Street and Constitution Avenue, N.W.
Washington, DC 20230
Phone: 202-482-4951/Fax: 202-482-3592

Department of Defense

Chief Human Capital Officer
4000 Defense, Pentagon, Room 5D636
Washington, DC 20301-4000
Phone: 703-571-9284

Office of Management and Budget

Chief Human Capital Officer
1600 Pennsylvania Avenue, N.W., EEOB, Room 260
Washington, DC 20502
Phone: 202-456-7070/Fax: 202-456-5938

Department of Energy

Chief Human Capital Officer 1000 Independence Avenue,
SW Room 4E-084, Forrestal Bldg.
Washington, DC 20585
202.586.5610

Department of Health and Human Services

Chief Human Capital Officer
200 Independence Avenue, S.W., Room 300E
Washington, DC 20201
Phone: 202-690-6191/Fax: 202-690-6758

Department of Housing and Urban Development

Chief Human Capital Officer
451 7th Street, S.W.
Washington, DC 20410
Phone: 202-708-0940/Fax: 202-619-8129

Department of Education

Chief Human Capital Officer
400 Maryland Avenue, S.W.
Washington, DC 20202
Phone: 202-260-7337/ Fax: 202-260-3761

Department of Homeland Security

Chief Human Capital Officer
1201 New York Avenue, N.W.

Washington, DC 20528
Phone: 202-357-8151/Fax: 202-357-8295

Department of the Interior

Chief Human Capital Officer
1849 C Street, N.W.
Washington, DC 20240
Phone: 202-208-6291/Fax: 202-513-0734

Department of Justice

Chief Human Capital Officer
950 Pennsylvania Avenue, N.W.
Washington, DC 20530
Phone: 202-514-5501/Fax: 202-305-4746

Department of Labor

Chief Human Capital Officer
200 Constitution Avenue, N.W.
Washington, DC 20210
Phone: 202-693-4040/Fax: 202-693-4055

Department of State

Chief Human Capital Officer
HST Room 6218
2201 C Street, N.W.
Washington, DC 20520
Phone: 202-647-9898/Fax: 202-647-5080

Department of Transportation

Chief Human Capital Officer
1200 New Jersey Avenue, SE
8th Floor, West Building
Washington, DC 20590
Phone: 202-366-2332/Fax: 202-366-2191

Department of the Treasury

Chief Human Capital Officer
1500 Pennsylvania Avenue, N.W. Room 1136MT
Washington, DC 20220
Phone: 202-622-6052/Fax: 202-622-0300

Department of Veterans Affairs

Chief Human Capital Officer
810 Vermont Avenue, N.W.
Washington, DC 20420
Phone: 202-273-4901/Fax: 202-273-4914

Environmental Protection Agency

Chief Human Capital Officer
1200 Pennsylvania Avenue, N.W.
Washington, DC 20460
Phone: 202-564-4600/Fax: 202-564-0233

National Aeronautics and Space Administration

Chief Human Capital Officer
300 E Street, S.W.
Washington, DC 20546
Phone: 202-358-0520/Fax: 202-358-3039

Nuclear Regulatory Commission

Chief Human Capital Officer
Mail Stop: GW 5A06
Washington, DC 20555
Phone: 301-492-2076/Fax: 301-492-2241

Office of Personnel Management

Chief Human Capital Officer
1900 E Street, N.W.
Washington, DC 20415
Phone: 202-606-3207/Fax: 202-606-4520

Social Security Administration

Chief Human Capital Officer
6401 Security Boulevard
Baltimore, MD 21235
Phone: 410-965-1900/Fax: 410-965-8996

General Services Administration

Chief Human Capital Officer
1800 F Street, N.W.
Washington, DC 20405
Phone: 202-501-0398/Fax: 202-219-0982

Intelligence Community Chief Human Capital Officer

Chief Human Capital Officer
Office of the Director of National Intelligence
Washington, DC 20511
Phone: 202-201-1822/Fax: 202-201-1379
Phone: 703-482-1290/Fax: 703-482-0684

National Science Foundation

Chief Human Capital Officer
4201 Wilson Blvd.
Arlington, VA 22230
Phone: 703-292-8100/Fax:

Federal Trade Commission

Chief Human Capital Officer
600 Pennsylvania Avenue
Washington, DC 20580
Phone: 202-326-2748

U.S. Postal Service

Chief Human Resources Officer
475 L'Enfant Plaza
Washington, DC 20260-4000

U.S. Department of Labor Veterans' Employment and Training Service
Street Address
City, State, Zip Code

Date

(XXXX)
Street Suite
City, State Zip

Re: Case Resolution Conference

Case No: (XXXX)

Dear (XXXX),

All parties have agreed to participate in a case resolution conference. The meeting will take place via [\[insert teleconference, in-person meeting, etc.\]](#) on [\[insert date and time\]](#) [\[insert location or telephone conference information\]](#).

This conference is being held by the U.S. Department of Labor pursuant to the Uniformed Services Employment and Reemployment Rights Act of 1994, 38 U.S.C., Chapter 43.

The purpose of this conference is to assist the Veterans' Employment and Training Service of the U.S. Department of Labor in attempting to reach a final resolution of this claim. It is not a formal hearing, and the statements made are not under oath. Notes will be taken and made part of the case file.

The agenda is as follows:

1. The Investigator will present the claim as made by the claimant, and ask for verification of the allegations.
2. The Investigator will then present the employer's position and, again, ask for verification that this is the company's position.
3. Each party will be allowed to add any additional evidence without interruption during its presentation.
4. All questions and statements should be addressed to the Investigator. There will be no direct cross conversation or cross examination. If anyone wishes to respond to what another has said, please wait until that person is finished. If you have any questions, please channel them through the Investigator.
5. Either party may request a recess, or the Investigator may request one as appropriate.
6. All parties are asked to maintain proper courtesy throughout the conference so that we may expedite the resolution of this matter.

The Department strongly urges the parties to consider settling this claim. Suggested proposals to resolve the dispute will be open for discussion.

If amicable resolution is not reached, the Investigator will inform [insert employer], that the claimant has the right to request that their case be referred to the [insert U.S. Attorney General/Office of Special Counsel] for consideration of legal representation.

Sincerely,

(XXXX)

[insert title]