FEDERAL CONTRACTOR VETERANS' EMPLOYMENT REPORT VETS-100A

(For covered contracts entered into or modified on or after December 1, 2003.)

OMB NO: 1293-0005
Expires:

Persons are not required to respond to this collection of information unless it displays a valid OMB number

RETURN COMPLETED REPORT TO:
U.S. DEPARTMENT OF LABOR
VETERANS' EMPLOYMENT AND TRAINING SERVICE
VETS-100 Reporting Office
4200 Forbes Blvd., Suite 202
Lanham, Maryland 20706

ATTN: Human Resource/EEO Department

TYPE OF REPORTING ORGANIZATION (Check one or both, as applicable)	TYPE OF FORM (Check only one)
☐ Prime Contractor ☐ Subcontractor	☐ Single Establishment ☐ Multiple Establishment-Headquarte ☐ Multiple Establishment-Hiring Locat ☐ Multiple Establishment-State Consc (specify number of locations) ____

COMPANY IDENTIFICATION INFORMATION (Omit items preprinted above-ADD Company Contact Information Below)

COMPANY No:	*TWELVE MONTH PERIOD ENDING*		2 (M M D D Y)
NAME OF PARENT COMPANY:	*ADDRESS (NUMBER AND STREET):*		
CITY:	*COUNTY:*	*STATE:*	*ZIP COD*
NAME OF COMPANY CONTACT:	*TELEPHONE FOR CONTACT:*	*EMAIL:*	

NAME OF HIRING LOCATION:	*ADDRESS (NUMBER AND STREET):*		
CITY:	*COUNTY:*	*STATE:*	*ZIP COD*

NAICS:	**DUNS:** - -	*EMPLOYER ID (IRS TAX No.)* -	

INFORMATION ON EMPLOYEES

REPORT ALL PERMANENT FULL-TIME OR PART-TIME EMPLOYEES AND NEW HIRES WHO ARE VETERANS, AS DEFINED ON REVERSE. DATA ON NUMBER C EMPLOYEES IS TO BE ENTERED IN COLUMNS L, M, N, O, AND P, LINES 1-10. DATA ON NEW HIRES IS TO BE ENTERED IN COLUMNS Q, R, S, T, AND U. ENTE THE MAXIMUM AND MINIMUM NUMBER OF EMPLOYEES. INSTRUCTIONS ARE FOUND ON THE REVERSE OF THIS FORM.

JOB CATEGORIES	NUMBER OF EMPLOYEES					NEW HIRES (PREVIOUS 12 MONTHS)				
	DISABLED VETERANS (L)	OTHER PROTECTED VETERANS (M)	ARMED FORCES SERVICE MEDAL VETERANS (N)	RECENTLY SEPARATED VETERANS (O)	TOTAL EMPLOYEES, BOTH VETERANS AND NON-VETERANS (P)	DISABLED VETERANS (Q)	OTHER PROTECED VETERANS (R)	ARMED FORCES SERVICE MEDAL VETERANS (S)	RECENTLY SEPARATED VETERANS (T)	TOTAL I BOTH VE NON-\
EXECUTIVE/SENIOR LEVEL OFFICIALS AND MANAGERS 1										
FIRST/MID LEVEL OFFICIALS AND MANAGERS 2										
PROFESSIONALS 3										
TECHNICIANS 4										
SALES WORKERS 5										
ADMINISTRATIVE SUPPORT WORKERS 6										
CRAFT WORKERS 7										
OPERATIVES 8										
LABORERS/HELPERS 9										
SERVICE WORKERS 10										
TOTAL 11										

Report the total maximum and minimum number of permanent employees during the period covered by this report.

Maximum Number	Minimum Number