Veteran’s Employment Assistance Program (VEAP)

Sacramento Regional Veterans’ Energy Employment Project

**Veterans Employment Project Application**

**CONTACT INFO**

**Fields with an \* are required**

**First Name:\***       **Last Name:\***

**Address:\***

**City:\*** **State:\*** **Zip:\***

**County:**

**Email:\***

**Contact Phone (cell phone preferred):\***

Home or Alternate Phone:

**Best time to contact:\***  AM  PM  Anytime

**CAREER AND EDUCATIONAL BACKGROUND**

**Highest level of education completed:\***

Are you currently employed?  Yes  No

If yes, name of current employer:

Title:

What industry/job experience have you had in the last 5 years? Check all that apply

Architecture or Engineering  Military

Building Maintenance  Student

Construction  Other:

Number of years full-time job experience:

Describe any related work experience:

**OTHER BACKGROUND INFORMATION**

**Last 4 digits of Social Security number:\***

**Do you have a valid California Driver’s License?\***  Yes  No

**Are you eligible to work in the US?\***  Yes  No

**Are you able to show proof of your eligibility?\***  Yes  No

**Were you ever convicted of a felony?\***  Yes  No

**Are you on active probation (formal, informal or court ordered)?\***  Yes  No

**MILITARY EXPERIENCE**

**Are you a veteran who received an honorable discharge?\***  Yes  No

If yes, last military pay grade:

Are you currently on active military reserve?  Yes  No

Military Branch:

MOS Code:

Please list the three most recent specialties you held during your military service:

**ADDITIONAL INFORMATION**

Gender:  Male  Female

Ethnicity/Race:

I hereby certify that all information and other statements made by me in this application are true and correct.

**Participants enrolled in this program are not eligible for VA benefits**

Return completed form to:

SETA VEAP

ATTN: Lorna Devine

925 Del Paso Blvd Ste 100

Sacramento, CA 95815

Or Fax 916-263-4618, ATTN: Lorna Devine