



Veterans and Eligible Spouses Triage Form

The MassHire Department of Career Services provides employment and training services to veterans and their families. Dedicated staff are available throughout the state to help veterans transition to civilian employment. Veterans and their eligible spouses receive Priority of Service throughout the full array of services provided through the MassHire Career Center system.

Name: _____

Today's Date: _____

Address: _____

City/Town: _____

Zip Code: _____

Phone: _____

Email: _____

This form is used to determine your eligibility for additional services and is intended solely to provide priority to Eligible Veterans and Eligible Spouses or Persons that meet certain criteria. This information is being requested on a voluntary basis and will be kept confidential. Refusal to provide the information will not subject you to any adverse consequences.

Please answer the following:

- ☐ I served in the U.S. Armed Forces and was on active duty for more than 180 days (other than training)
Yes ____ No ____
Date of Service: From: _____ To: _____
- ☐ I was discharged or released under conditions other than Dishonorable
Yes ____ No ____
- ☐ I have a service-connected disability or have a pending V.A. claim for a service-connected disability
Yes ____ No ____
- ☐ I am homeless or at risk of homelessness, fleeing or attempting to flee from domestic/dating violence, sexual assault, stalking or other dangerous or life-threatening condition in your current housing situation and have no other residence and lack the resources to obtain permanent housing
Yes ____ No ____
- ☐ I left military service within the previous 12 month AND I have been unemployed for 27 or more weeks (cumulative) within the past year
Yes ____ No ____
- ☐ I have been subject to any stage of the criminal justice system and need assistance overcoming barriers resulting from a record of arrest or conviction
Yes ____ No ____
- ☐ I am lacking a High School Diploma or GED (Hi-Set)
Yes ____ No ____
- ☐ I am considered low-income or receiving public assistance (Chapter 115 Benefits, SNAP, etc.)
Yes ____ No ____

- I am between the ages of 18-24
Yes ____ No ____
- I served in Vietnam at any time during the period from February 28, 1961 to May 7, 1975
Yes ____ No ____
- I served on active duty (other than for training) at any time during the period from August 4, 1964 to May 7, 1975?
Yes ____ No ____
- I am a Transitioning Service Member identified as being in need of intensive services; who has not met career readiness standards (indicated on DD form 2958 or referred to career center), or who is between the ages of 18-24, or who has been involuntarily separated from the Armed Forces because of a reduction in force.
Yes ____ No ____
- I am a wounded Warrior in military treatment facilities.
Yes ____ No ____
- I am the Spouse of:
 - Veteran who died of a service-connected disability
Yes ____ No ____
 - An active-duty service member who is currently listed as either Missing in Action (MIA), captured or detained/interned for more than 90 days
Yes ____ No ____
 - A 100% service-connected disabled veteran as determined by the V.A.
Yes ____ No ____
 - A veteran who had a 100% service-connected disability at time of his/her death
Yes ____ No ____

May we contact you? Yes ____ No ____

Thank you for your service to our country!!
If you would like additional assistance please submit your form to:
albert.st.george@mass.gov
 The MHCICC Veteran Employment Services looks forward to assisting you

