



DEPARTMENT OF VETERANS AFFAIRS  
Puget Sound Health Care System  
1660 South Columbian Way  
Seattle, WA 98108-1595

American Lake Division  
Tacoma, WA 98493-5000

Seattle Division  
Seattle, WA 98108-1597

DOB:  
SNS:  
US Citizen: NO  
Date:  
Mail Stop:

Dear :

Welcome to the Department of Veterans Affairs (VA). You will be assigned to our facility as a \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_ under authority of 38 U.S.C. 7405 (a) (1). During your period of affiliation with our facility, you are authorized to perform services as directed by the ACOS, Research & Development, under the supervision of \_\_\_\_\_ .

In accepting this assignment you will receive no monetary compensation and you will not be entitled to those benefits normally given to regularly paid employees of the Veterans Health Administration, such as leave, retirement, etc. You will, however, be eligible to receive the benefits below. Cash cannot be paid in lieu of any of these benefits.

\_\_\_\_\_ Uniform                      \_\_\_\_\_ Laundering of Uniforms

If you agree to those conditions, please sign the statement below and return this letter to Human Resources Management Service (05A). This agreement may be terminated at any time by either party by written notice of such intent.

Please indicate your veteran status by circling the appropriate number below.

Sincerely,

Alex Spector,  
Acting Director

-----  
I agree to serve in the above capacity under the conditions indicated.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

- Veteran Status:*
- 1. Vietnam\*
  - 2. Other Veteran
  - 3. Non-Veteran

*\*For this purpose, a Vietnam Veteran is one with service between August 5, 1964 to May 7, 1975.*