

**OFFER OF REASSIGNMENT**

In response to your request for an accommodation, we agreed that reassignment was a suitable option. Based on your selection of the options provided on VA0857h, we identified a vacancy that appears to be suitable.

1. EMPLOYEE NAME	2. EMPLOYEE OFFICE (i.e. VBA, VHA, etc.)	
3. CURRENT STATION ID (i.e. 103 - Austin, TX)	4. CURRENT SUPERVISOR'S NAME	5. DATE (MM/DD/YYYY)

NEW JOB INFORMATION

6. JOB SERIES & POSITION No. (i.e., 0301-Secretary; PN -91655136)	7. PAY LEVEL & SALARY (i.e., GS-0343-05; 48,999)	8. ORGANIZATION (i.e., VBA, VHA, etc.)
9. LOCATION (City/State)	10. STATION ID (i.e. 103 - Austin, TX)	11. SUPERVISOR NAME

You have ten (10) business days from today's date to consider whether to accept the offered reassignment. If you do not accept, we will not seek another position for you, unless you can show that the position offered is incompatible with your functional limitations.

Your decision is due by (MM/DD/YYYY): _____

Due to extenuating circumstances, exceptions to the due date above can be granted based on the employee's official VA Duty Status at the time of issuance of this form.

12. GAINING HR OFFICIAL HR MANAGER NAME (i.e., John Smith, Austin HR Director)	13. HR MANAGER SIGNATURE	14. DATE (MM/DD/YYYY)
15. NATIONAL REASONABLE ACCOMMODATION CONSULTANT (NRAC) NAME	16. NRAC SIGNATURE	17. DATE (MM/DD/YYYY)

ACCEPTANCE/DECLINATION OF JOB OFFER

I, THE EMPLOYEE, CERTIFY THAT I ACCEPT THE JOB OFFERED ABOVE.

18. EMPLOYEE SIGNATURE	19. DATE (MM/DD/YYYY)
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I, THE EMPLOYEE, CERTIFY THAT I DO NOT ACCEPT THE JOB OFFERED ABOVE. BELOW IS MY EXPLANATION.

20. EMPLOYEE SIGNATURE	21. DATE (MM/DD/YYYY)
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22. THE JOB OFFER IS INCOMPATIBLE WITH THE FUNCTIONAL LIMITATIONS THAT WERE LISTED IN MY ORIGINAL REQUEST FOR ACCOMMODATION BECAUSE (must be specific)

PLEASE RETURN THIS SIGNED FORM TO

23. REASONABLE ACCOMMODATION COORDINATOR (RAC) NAME	24. RAC PHONE NUMBER	25. RAC EMAIL ADDRESS
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*** When sending this form via electronic means, please ensure the file is encrypted to protect the requester PII & PHI information.

This form should be retained separately from the employee's Official (paper or electronic) Personnel Folder.