



U.S. Department
of Veterans Affairs

VA PORTLAND HEALTH CARE SYSTEM
3710 SW U.S. Veterans Hospital Rd.
Portland, OR 97239

**APPOINTMENT LETTER FOR TRAINEES
APPOINTED WITHOUT COMPENSATION (WOC)**

In Reply Refer To: 648/P2EDUC

Dear WOC applicant,

Welcome to the Department of Veterans Affairs. You will be assigned to our facility as _____
(Position Title)
under the supervision of _____ from _____ through _____
(Name of VA Supervisor) *(Start Date)* *(End Date)*
under the authority of Title 38 United States Code (U.S.C.) 7405(a) (1).

In accepting this training 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 (VHA), such as leave, health insurance, or retirement. You are also held to the requirement of ensuring patient information confidentiality and must ensure that no information is shared outside of this facility and only on a “need to know” basis within the facility.

If you agree to these conditions, please sign the following statement and return the letter with your WOC application packet. Either party may terminate this agreement any time by written notice of such intent.

Sincerely,

(Chief, Human Resources Management Service Signature) _____
(Date)

I agree to serve in the preceding capacity under the conditions indicated.

(WOC Applicant Signature) _____
(Date)

(Printed or Typed Name)