In Reply Refer To: 05 HRMS

Dear TYPE NAME HERE,

Welcome to the Department of Veterans Affairs. You will be assigned to our facility as Without Compensation (WOC) trainee from MM/DD/YYYY through MM/DD/YYYY 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.

If you agree to these conditions, please sign the following statement and return the letter in the enclosed envelope. Either party may terminate this agreement any time by written notice of such intent.

Sincerely,

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Chief, Human Resources Management Service

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

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 (Signature)

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 (Printed or Typed Name/Institution Name/Program of Study)