



U.S. Department of Veterans Affairs

Veterans Health Administration
Beckley VA Medical Center

200 Veterans Avenue
Beckley, WV 25801
www.beckley.va.gov

Date _____

Dear (your name) _____:

Welcome to the Beckley Veterans Affairs Medical Center. You will be assigned to our facility in a Without Compensation (WOC) basis as a Health Professional Trainee from _____ not to exceed _____ under authority of 38 U.S.C. 7405 (A)(1) or 5 U.S.C. 311. During your period of affiliation with our facility, you are authorized to perform services as directed by Leah Jones, DO, Designated Education Officer.

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 Department of Veterans Affairs, such as leave, retirement, etc. (a student volunteer is not a Federal Employee for any purposes other than injury compensation and law related to the Tort Claims Act). You may, if applicable, be eligible to receive the benefits indicated below. Cash cannot be paid in lieu of any of these benefits

- Quarters Subsistence Uniforms Laundering of Uniforms N/A

If you agree to these conditions, please sign the statement below and return the letter via email or in person to Education staff: john.marcum@va.gov and/or deborah.murdock@va.gov. This agreement may be terminated at any time by either party by written notice of such intent.

Also, please indicate your veteran status by checking the appropriate number below.

Sincerely,

Charlene L. McCollum
VISN 5 Chief Human Resources Officer

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

Veteran Status	
1. Vietnam Veteran*	<input type="checkbox"/>
2. Other Veteran	<input type="checkbox"/>
3. Non-Veteran	<input type="checkbox"/>
*For this purpose, a Vietnam Veteran is one with Service between August 5, 1964 and May 7, 1975.	

WOC Employee Signature:

Date: _____