VASLCHCS Initiative Recruitment Referral Award

Attachment A

SECTION 1. TO BE COMPLETED BY APPLICANT AND REFERRING EMPLOYEE

Applicant Name: _____

Position referred for (announcement number and title): _____

Referred by (VASLCHCS employee name): _____

Employee Position Title: _____

I was referred by an employee of the_____.

_____ _____
Signature of Applicant Date

I am referring the above applicant for a position _____.

_____ _____
Signature of Employee Date

NOTE: THIS FORM MUST ACCOMPANY YOUR EMPLOYMENT APPLICATION WHEN SUBMITTED TO VASLCHCS HUMAN RESOURCES OR NURSING OFFICE, when applying to positions announced by VA Salt Lake City Health System.

SECTION 2. TO BE COMPLETED BY HUMAN RESOURCES

The applicant named above has been selected for employment at VASLCHCS, (Service) _____.

Entrance on Duty Date: _____

Position: _____

_____ _____
Human Resources Specialist Date

SECTION 3. **TO BE COMPLETED BY HUMAN RESOURCES** (after six months of continuous employment)

The applicant named above has been continuously employed at the VASLCHCS, (Service) _____ for six (6) months from the entrance on duty date.