



Response is mandatory. This information will be kept confidential. It will be used for reporting purposes, conducting surveys, and improving the quality of VHA's clinical training programs. This information will be entered in the "New Person" file in Veterans Health Information Systems and Technology Architecture (Vista).

Disclosure of your Social Security Number (SSN) is mandatory to identify individuals with identical names. Failure to provide this information may delay or make impossible the proper application of Civil service rules and regulations and VA personnel policies and thus may prevent you from obtaining clinical training at VA. Solicitation of the SSN is authorized under the provisions of Executive Order 9397, dated November 22, 1943. The information gathered through the use of this number will be used as necessary for statistical studies and personnel administration in accordance with established regulations and published notices of systems of record.

First Name		MI	Last Name	
Social Security Number			Date of Birth	
Are you in the United States using a visa? <input type="checkbox"/> Yes <input type="checkbox"/> No			Was the medical training you received from an institution outside of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Permanent Street Address				
City		State		Zip
Home Email Address				
<b>Current Degree Level:</b> <i>(mark only one)</i>				
<input type="radio"/> Certificate/Diploma <input type="radio"/> Associate <input type="radio"/> Baccalaureate <input type="radio"/> Masters		<input type="radio"/> Post-master's fellowship <input type="radio"/> Doctoral <input type="radio"/> Postdoctoral (other than residents) <input type="radio"/> Residency/Fellowship		
<b>Program of Study:</b> <i>(mark only one)</i>				
<input type="radio"/> Audiology <input type="radio"/> Chaplaincy <input type="radio"/> Dentistry <input type="radio"/> Dietetics <input type="radio"/> Health Information <input type="radio"/> Health Services Research & Development <input type="radio"/> Imaging (Radiologic/Ultrasound Tech, etc.) <input type="radio"/> Laboratory <input type="radio"/> Medical Student <input type="radio"/> Medical Resident/Fellow <input type="radio"/> Medical Post-residency Physician in a VA Special Fellowship (Ambulatory Care, National Quality Scholars, Women's Health, etc.)		<input type="radio"/> Medical/Surgical Support (Respiratory Tech, Biomedical Tech, etc.) <input type="radio"/> Nurse Anesthetist <input type="radio"/> Nursing <input type="radio"/> Optometry <input type="radio"/> Other <input type="radio"/> Pharmacy <input type="radio"/> Physician Assistant <input type="radio"/> Podiatry <input type="radio"/> Psychology <input type="radio"/> Rehabilitation (OT, PT, KT, etc.) <input type="radio"/> Social Work <input type="radio"/> Speech-Language Pathology		
What is the LAST YEAR that you anticipate being in a training program at this VA facility?		<input type="radio"/> 2005	<input type="radio"/> 2006	<input type="radio"/> 2007
		<input type="radio"/> 2008	<input type="radio"/> 2009	<input type="radio"/> 2010