



**DEPARTMENT OF VETERANS AFFAIRS**  
**Palo Alto Health Care System**  
Psychology Service (116B)  
3801 Miranda Ave.  
Palo Alto, CA 94304

April 2016

Dear Intern,

Welcome to VA Palo Alto Health Care System. Attached to this letter, please find a checklist and instructions for the forms and documents required by VA Palo Alto Health Care System, Human Resources Management Service (HRMS) for your Psychology Internship temporary federal employment. The checklist provides information on how to fill out each form. Please keep in mind the following as you fill these forms out:

1. All forms must be written or typed in **Black Ink**. You can print out all the forms to fill them out. Some, but not all, of the forms can also be completed electronically and then printed for your signature and mailing.
2. Do not leave any item blank, except for the "VA E-mail Address (Required)" block on the "Information Required for VA PIV Enrollment" form.
3. Mark any item that does not apply to you "N/A" or Not Applicable.
4. Please enclose an updated vita and/or resume.
5. Remember to sign and date each form requiring your signature.
6. Provide copies of the 2 original IDs you will be required to present to Human Resources when you arrive on the first day of intern orientation. Refer to the acceptable documents lists on Page 9 of the I-9 Employment Eligibility form. The names on both forms of ID proofing must match exactly. If one form of ID has a middle name or initial, the other form of ID must have a matching middle name or initial. One form can contain a middle name and the other one can have a middle initial as long as they match. One of the two IDs for verification needs to be a Federal or State Government issued picture ID.
7. All employees must have direct deposit to receive their pay. If you are unable to complete the direct deposit form at this time, please do so as soon as you have arranged for banking in this area and then return the completed form to me.
8. In order to get employment benefits (e.g., health and life insurance) here, the "Conditions of Temporary Employment" is for one calendar year and one day. However, your one year internship appointment will end on August 19, 2017.
9. You must complete the "Mandatory Training for Trainees" (MTT) training. Refer to the TMS registration instructions on the website to complete the "Mandatory Training for Trainees" and print the certificate of completion for this training. **Please note: Take your training 1 week before your start date at the VA. Once done please email [Dana.Iller@va.gov](mailto:Dana.Iller@va.gov).**
10. Please enclose one set of original health forms in a separate sealed envelope and mark the envelope for "Employee Health". This is to protect your privacy. The two health forms are the "Employee Health Occupational Health Supplemental History" and "Report of Medical History" (SF 93). Please complete another set of original health forms to bring with you to your physical exam appointment at this or another VA.
11. Please make a copy for your records of all the completed forms and certificates prior to mailing the originals back to me.
12. **Please mail all the forms in one packet to Dana Iller, Program Support Assistant, Psychology Service, no later than June 1, 2016.**

After all the forms have been received in Psychology Service and submitted to Human Resources Management Service by Dana Iller, an HR Specialist will contact you to schedule the physical and fingerprinting, provide you with further instructions upon completion, and give you access to the electronic Standard Form SF 85 (E-QIP). You may discuss with HR the possibility of having a physical done free of charge at a VA close to you. To assist us in arranging a courtesy physical at a VA close to you, please email me your anticipated locations and best phone number to reach you during June, July and August. If possible, please provide the name of the VA closest to you and an HR contact name and number from that VA. A VA Palo Alto HR Specialist will be contacting the closest VA to you in order to send them information they will need to do a courtesy physical for you. The VA closest to you will then be calling you to schedule the courtesy physical. This will help to speed up the process of on-boarding.

You may also choose to have the physical done by a private physician that may be covered fully or in part by your current health insurance, but the VA does not reimburse the cost of a pre-employment physical conducted by a private physician. If you choose to have your physical done by a private physician, HR can send you the specific paperwork that the physician will need to complete. This must be done before you will be allowed to start your Internship at the VA Palo Alto Health Care System and be put on the VA Payroll.

**Again, in order to schedule the physical, the fingerprinting, and receive access to the electronic Standard Form SF 85 (E-QIP), you must complete all the forms listed on the attached checklist and return them to me in Psychology Service no later than June 1, 2016. It will take time to complete a pre-employment physical, fingerprinting and the electronic form SF 85 (E-QIP). Once I have received the completed forms, the package will then be submitted to HR. If you have not heard from HR by July 1, 2016, please email or call Dana Iller to follow up.**

Health and Life insurance forms will be provided to you during the new employee processing by Human Resources Management on August 22, 2016. If you submit your health insurance election form by September 2, 2016, your health insurance coverage will begin on September 4, 2016.

Last, but not least, once you know what your new home address and contact phone numbers in this area will be, please email the information to me, so that I can update your documentation.

If you have any questions, please feel free to call Dana Iller, Program Support Assistant at (650) 493-5000, x65476, or email me at [Dana.Iller@va.gov](mailto:Dana.Iller@va.gov).

Thank you for your cooperation.

*Dana G. Iller, B.S.E.*  
Program Support Assistant  
VA Palo Alto Health Care System  
Psychology Service (116B)  
3801 Miranda Avenue  
Palo Alto, CA 94304  
(650) 493-5000, Ext. 65476  
Fax (650) 852-3445

## FORMS CHECKLIST AND INSTRUCTIONS FOR Postdoctoral Fellows and Interns in Psychology Service

The pre-employment forms on this list can be accessed for your completion at <http://www.paloalto.va.gov/MentalHealth/PsychologyForms.asp> in the section titled *Required Human Resources Forms for All Psychology Trainees*. Read and very carefully follow the instructions on every form. Additional instructions are provided on this sheet to assist you in completing the forms with more accuracy and with less difficulty where errors or omissions often occur. If you have any questions, do not hesitate to call Dana Iller, Program Support Assistant, Psychology Service, at 650-493-5000, extension 65476. **Please use black ink only and write as legibly as possible.**



**OF-306, Declaration for Federal Employment** – False statements on any part of this document may be grounds for not hiring you or for dismissing you after you begin work.

- Complete boxes 1 through 6
- Answer questions 7a through 15
- Read 16 and respond accordingly
- Read Certifications / Additional Questions and sign on line 17a, only. You will sign 17b the day you come on duty.



### **I-9, Employment Eligibility Form.**

- Section 1, Page 7, complete, sign, and date
- Section 2 will be completed by Human Resources
- Check Page 9 to verify your eligibility and please provide photocopies of two IDs of the acceptable documents needed to verify your citizenship. The copies of the two IDs you provide should be the two original IDs you are going to present to Human Resources. You will need to include **one item from List A and one item from List B or C, OR one item each from List B and C.**

The most common forms used are a Certificate of Naturalization or Passport from List A and a birth certificate, or social security card and driver's license from List B and C.

**Note:** If you intend to use a school ID, only state school IDs are acceptable (e.g., San Jose State, Cal State Hayward/Cal State East Bay)

- Please, bring your original items of identification with you when reporting to Human Resources for fingerprints/processing.



### **Employee Health Supplemental History Form**

- Provide copy of documentation of immunizations or titres
- Answer, sign documentation and place in a sealed envelope marked "Employee Health". Mail the envelope to Psychology Service with the other HR forms. HR should forward the envelope to Employee Health for your pre-employment physical.

- Complete a second original form to bring with you to Employee Health



### **SF-93, Report of Medical History**

- Answer, sign documentation and place in a sealed envelope marked “Employee Health”. Mail the envelope in with the rest of your HR forms. HR should forward the envelope to Employee Health for your pre-employment physical.
- Complete a second original form to bring with you to Employee Health



### **SF-256 – Self-Identification of Handicap**

- Fill in your name. Do not put in your birth date or your social security number on this form.
- Read: Definition of a Handicap. Complete the box in the corner as follows:
  - If you do not wish to identify your handicap, enter 01
  - If you do not have a handicap, enter 05
  - If you have a handicap and it is not listed, enter 06



### **Form W-4 – Employee’s Withholding Allowance Certificate – Federal Tax**

- Complete boxes 1, 2, 3, and 4 and fill in home address, city/state/zip code
- Read instructions and then enter the number of exemptions in box 5
- Sign and date the form



### **DE-4 – Employee’s Withholding Allowance Certificate – State Tax**

- Fill in your name, social security number, address and filing status
- Read the instructions and then enter the number of exemptions on line 1 and any additional amount you may want withheld on line 2
- Sign and date the form



### **FMS Form 11- 92, *FastStart* Direct Deposit – Electronic deposit of pay is mandatory**

- Complete box 1 with social security number, name and home telephone number
- Complete box 2
- Complete box 3 with routing transit number, account number, account title and the name of your financial institution. You can get the transit and account number from your financial institution OR, if your electronic deposit is going into your checking account, you can write void on a blank check and attach it.
- If you wish to establish an “Allotment”, you need to complete information in the boxes under 4. If you wish to make more than one allotment, you will need to complete additional forms.
- Sign and date the form



### **Complete the “Mandatory Training for Trainees” (MTT) and print out the certificate of completion.**

- Follow the [Instructions to Register through TMS](#) on the pre-employment forms webpage.

- Take your training *1 week before your start date* at the VA. Once done please email [Dana.Iller@va.gov](mailto:Dana.Iller@va.gov).
- **NOTE:** Please print a copy of the certification of completion. Send one copy to Ms. Iller and bring an extra copy with you whenever you come to Human Resources for processing.



#### **Information for Fingerprinting**

- Complete all boxes. Please note for the Occupation section enter *“Psychology Intern”* or *“Psychology Postdoctoral Fellow”* and for the Type of Hire section enter *“Temporary 1 year appointment”*.



#### **Information Required for VA PIV Enrollment**

- Complete and submit.
- **NOTE:** Leave the VA Email Address field blank. A VA email address will be assigned to you once your application is processed by Human Resources.



#### **Conditions of Temporary Employment**

- Sign and date.
- **NOTE:** Paid Interns and Postdoctoral Fellows **will be** receiving health and life insurance



#### **Statement of Commitment and Understanding**

- Sign, fill in Position Title and date (Psychology Intern / Psychology Postdoctoral Fellow)



#### **Statement of Understanding Regarding Unemployment Benefits**

- Sign and date



#### **VA Form 4637, Employee Educational Data**

- Part I, Section A. Check general education Level.
- Part I, Section B. Check higher education certificate or degree.
- Part II Enter one digit education code, year of completion, Enter six digit program code, fill in name, social security number, Service, sign and date (**Please note:** Service and Division will be Psychology Service, PAD).



#### **SF-144, Statement of Prior Federal Service**

- Complete all applicable boxes, sign and date



#### **School Transcript(s) – Not a HR form** (must submit with your application)



#### **Curriculum Vitae – Not a HR form** (must submit with your application)

**If you have any questions about the MTT training or completion of these forms, do not hesitate to call Dana Iller at (650) 493-5000, extension 56-65476.**

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**NOTE: Information Only**

**Electronic Questionnaires for Investigation Processing (E-QIP)**

Human Resources will notify you to proceed with the E-QIP process, upon receipt of your appointment package from Psychology Service. Upon completion of E-QIP data entry process, you will be prompted to review for accuracy. Once all sections are accurate and complete, you must print, sign, and date the “Release of Information” and “E-QIP Certification” and forward them to the servicing HR Specialist as soon as possible.

**Personal Identification Verification** – You will be completing this process in Human Resources (HR) when you come in for processing.

- **Applicant must present two (2) forms of identification from the Accepted Identification Documentation List below.** The names on the identification **must** match exactly (If one ID has a full middle name, and the other has a middle initial, then the initial must match).

**Acceptable Identification Documentation Information**

**One Federal or State ID must** contain a photograph.

- Both IDs **must** be **original** documents
- Both IDs **must** be **currently valid**, not expired
- Please see the acceptable and unacceptable ID proofing examples provided below

**ACCEPTABLE NAME VARIATIONS**

ID # 1 – John Henry Smith; ID # 2 – John Henry Smith

ID # 1 – John H. Smith; ID # 2 – John H. Smith

ID # 1 – John Henry Smith; ID # 2 – John H. Smith

**UNACCEPTABLE NAME VARIATIONS**

ID # 1 – John Henry Smith; ID # 2 – John Smith

ID # 1 – John H. Smith; ID # 2 – John Smith

**ACCEPTED IDENTIFICATION DOCUMENTATION LIST**

| <b>Picture ID From Federal or State Government</b>  | <b>Non-Picture ID or Acceptable Picture ID not issued by Federal or State Government</b>  |
|---|---|
| State-Issued Drivers License  | Social Security Card  |
| State-DMV-Issued ID Card  | Certified Birth Certificate   |
| U.S. Passport   | State Voter Registration Card   |
| Military ID Card  | Native American Tribal Document   |
| <b>Picture ID From Federal or State Government</b>  | <b>Non-Picture ID or Acceptable Picture ID not issued by Federal or State Government</b>  |
| U.S. Coast Guard Merchant Mariner card  | Certificate of U.S. Citizenship (INS Form N-560 or N-561)   |
| Foreign Passport with appropriate stamps  | Certificate of Naturalization (INS Form N-550 or N-570)   |
| Permanent Resident Card or Alien Registration Card with a photograph (INS Form I-151/I-551) | Certification of Birth Abroad Issued by the Department of State (Form FS-545 or Form DS-1350)   |
| ID Card issued by federal or state government agencies                                      | Permanent or Temporary resident card  |
|   | ID Card issued by local government agencies provided it includes the following information: name, date of birth, gender, height, eye color, and address |

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|  | Non-photo ID Card issued by federal or state government agencies provided it includes the following information: name, date of birth, gender, height, eye color, and address |
|  | School ID with photograph  |
|  | Canadian Drivers License   |
|  | U.S. Citizen ID Card<br>(Form I-179)   |