

INSTRUCTIONS FOR COMPLETING THIS FORM:

A Trainee Qualifications and Credentials Verification Letter (TQCVL) is required for all WOC Health Professions Trainees (HPT). Please copy the attached template to your Affiliate or Department letterhead without changing the wording, font, etc. All HPT's must be listed on a current TQCVL each year before Human Resources will grant a WOC Appointment Letter.

Please edit the 1st page program information (Education Sponsor, Sponsoring Institution, Training Program & date), the Name of the Educational Official, Title of the Educational Official, Name of University or School, and Name of Training Program.

Please edit 2nd page Office information and school program representative information (for 1st signature block). Please ensure this is correct on the form before emailing to school for signature and before form can be submitted to the VAMC program, 6 weeks before the start of rotation. The school's Program Coordinator can also edit the TQCVL to correct the information as needed. (Remove highlighting before printing.)

Students and trainees only need to be listed on one TQCVL per year, per VA. Multiple applicants who are in the same program can be listed on the same TQCVL. In the Line List, it is a requirement to list the **legal** last and first names, as well as email address, name of program, degree level, country of citizenship if not US, year or level of training, if the trainee is New or Continuing and expected program end date.

Insert or delete additional lines as needed, to allow all trainees for a program to be listed together.