



AMVETS VAVS REPRESENTATIVE / DEPUTIES / ASSOCIATES APPOINTMENT FORM

Revised Aug 2015

As Department Commander, I recommend that the AMVETS member(s) listed below be certified as an AMVETS VAVS representative to serve a **two-year term** at the VA medical facility listed below. Terms to run concurrently with NECmen for your department. **NOTE: Please use a separate form for each medical facility.**

Only one (1) representative and up to three (3) deputy representatives may be certified at a facility. Representatives/deputies can only be certified at one (1) VA medical facility.

VA Medical Facility: _____

AMVETS Member's Name: _____

Street Address: _____

City/State/ZIP: _____

Home Phone: () _____ Work Phone: () _____

EMAIL: _____

Membership Status (check one): Life ___ Annual ___ Post # _____

Recommended for: Rep. ___ Dep. ___ Assoc. Rep. ___ Assoc. Dep. ___

AMVETS Member's Name: _____

Street Address: _____

City/State/ZIP: _____

Home Phone: () _____ Work Phone: () _____

EMAIL: _____

Membership Status (check one): Life ___ Annual ___ Post # _____

Recommended for: Rep. ___ Dep. ___ Assoc. Rep. ___ Assoc. Dep. ___

Date

Dept. Commander - Signature

Department

Telephone Number

Please submit this form to:

**AMVETS National VAVS Certifying Official
AMVETS National Headquarters
4647 Forbes Boulevard
Lanham, MD 20706-4380**



VAVS Rep/Dep Commitment Form

Please Print

Post: _____ Dept: _____ VAMC: _____
Name: _____ Tel: _____
E-mail (Required): _____
Address: _____

Please indicate your agreement by checking all boxes and signing.

- I understand this is a 2-year appointment.
- I understand that I must participate in an orientation at the local medical center which will include one or more of these requirements depending on my volunteer assignment:
 - TB Test
 - Fingerprints
 - Background check
- I understand this requires active participation in quarterly VAVS Committee Meetings.
- I understand that I must serve as a "Regularly Scheduled" volunteer however this is NOT the primary requirement of the appointment.
- I understand that the primary requirement of the appointment is to recruit adults and youth to serve as "Regularly Scheduled" volunteers. (They do not need to be AMVETS members - they may be friends, neighbors or members of other community organizations.)

Print Name

Signature

Date

