

**CREDENTIALING CHECKLIST FOR PERSONNEL**

**APPLICATION FOR EMPLOYMENT PROFESSIONAL**

**SUPPLEMENTAL INFORMATION ABOUT ENGLISH PROFICIENCY**

**Please complete the following by providing the necessary information relative to your Primary, Secondary and Post Secondary Education.**

**Indicate each school attended the dates of attendance, the location of each school and the principal language in which the curriculum was conducted. This information is requested in order that the Department of Veterans Affairs, New York Harbor Healthcare System may comply with Public Law 95-201 which requires that all *employees involved in direct patient care be proficient in written and spoken English.***

<b>Name of School Attended</b>	<b>Dates of Attendance (month &amp; year)</b>	<b>Location of school</b>	<b>Language in which curriculum was taught</b>

**I certify that the above information is true and complete to the best of my knowledge and belief.**

\_\_\_\_\_

**Signature**

\_\_\_\_\_

**Date**

**I have reviewed the above information and find that it does (not) satisfy the requirements of Public Law 95-201**

\_\_\_\_\_

Human Resource Specialist

\_\_\_\_\_

Date