

**Attachment C: Notification Letters**

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DEPARTMENT OF VETERANS AFFAIRS  
WASHINGTON DC 20420

*[Interview notification letter sent to VR&E participants]*

Dear Veteran

As part of the Department of Veterans Affairs' (VA) ongoing commitment to improve services, VA is requesting your participation in a research project on veterans with serious injuries, including documenting and examining the facilitators and barriers to career-type employment and their experiences with vocational rehabilitation and employment services offered by VA to eligible veterans. Your participation will help improve the information that VA obtains about employment and the vocational rehabilitation programs and services it offers.

Our records indicate that you were or currently are a participant in VA's Vocational Rehabilitation and Employment (VR&E) program. This letter is to let you know that you have been randomly selected to participate in an interview of past and current VR&E program participants. VA will use the interview results to improve current services and plan for the future needs of veterans.

VA has contracted with a Washington, DC area-based firm, ICF International partnering with the Rehabilitation Research and Training Center of Virginia Commonwealth University, to conduct the interviews. Within the next two weeks, someone from ICF International or from the RRTC/VCU will call to arrange a convenient time to do the interview.

Participating in the interview is completely voluntary. Answering any specific question is also voluntary. Your survey responses are kept strictly confidential and will only be used to report results for groups, not individuals. There is no measurable risk to participants associated with completing the survey. Your current and future benefits will not be affected by whether or not you participate in the survey. If you choose to participate, the telephone interview will take no more than 45 to 60 minutes of your time.

If you have questions about your participation in the survey, please call an ICF International representative at 1-888-XXX-XXXX between the hours of 9 am - 5 pm Eastern Time. If you have questions about the objectives of the research from VA's perspective, you may call Dr. Cheryl Church at 202-XXX-XXXX.

Your assistance with this important project is greatly appreciated.

Sincerely yours,

[Name]

[Title]

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DEPARTMENT OF VETERANS AFFAIRS  
WASHINGTON DC 20420

*Telephone Interview Pre-notification letter sent to State VR Directors and Program Managers]*

Dear \_\_\_\_\_:

The Department of Veterans Affairs (VA) has authorized a study of the employment of veterans with serious injuries. As part of that study, VA would like to gain a better understanding of state level vocational rehabilitation programs, and it needs your help to do that.

Within the next two weeks, the independent research firm of ICF International, which have been contracted by VA to conduct this study, will call and invite you to participate in a telephone interview and try to schedule a time to do so. If you choose to participate, the telephone interview will take no more than 45 to 60 minutes of your time. The interview protocol that ICF international will use is contained as an attachment to this letter. Based on the questions it contains, you may designate someone else in your agency who has immediate first hand contact with persons with disabilities who make use of the programs and services offered by your State.

As a participant in this study, you are assured that information you share will be kept strictly confidential under the Privacy Act and will be used for research purposes only. Your participation in the interview is completely voluntary. The current and future funding sources and services offered by your state will not be affected regardless of whether you do or do not participate.

If you participate, you may refuse to answer questions that you do not want to answer, and you may withdraw from the interview at any time.

If you have any questions about the interview protocol, or how to best go about selecting someone to speak for your agency, please call an ICF representative at 1-888-XXX-XXXX between the hours of 9 a.m. – 5. p.m. Eastern Time.

If you have questions about the objectives of the research project from VA's perspective, please call Cheryle Church at 202-XXX-XXXX.

Your assistance with this important project is greatly appreciated.

Sincerely yours,

[Name]

Title

**Attachment D: Informed Consent Form**

## Informed Consent Form

I understand that I have been asked by ICF International to participate in an interview about my experiences with the Department of Veterans Affairs, Vocational Rehabilitation and Employment (VR&E) program. I also understand that my responses are voluntary. ICF International will take all precautions to protect the confidentiality of my responses and participation. Any information I provide today will be utilized for research purposes only.

I understand that I can terminate my participation or refuse to answer questions, at any time, without consequence. Finally, I can call Dr. Lance Anderson (703-934-3674), the study director, or Dr. Laurie May (703-934-3273), the Institutional Review Board chairperson, should I have questions or concerns about this interview.

**RESPONDENT BURDEN:** The purpose of the research is to gather information regarding whether the VR&E program is meeting the needs of severely disabled veterans, and to assist in determining whether the services that have been provided were effective. VA may not conduct or sponsor, and respondent is not required to respond to this collection of information unless it displays a valid OMB Control Number. Public reporting burden for this collection of information is estimated to average one hour per response, including the time for reviewing instructions and completing and reviewing the collection of information. If you have comments regarding this burden estimate or any other aspect of this collection of information, call 1-800-827-1000 for mailing information on where to send your comments.

I agree to participate in this interview.

Veteran \_\_\_\_\_ Date \_\_\_\_\_

Representative \_\_\_\_\_ Date \_\_\_\_\_

ICF Interviewer \_\_\_\_\_ Date \_\_\_\_\_