



2. The Department of Veterans Affairs will:
- a. Refer eligible claimants for on-the-job training programs as the establishment has availability.
  - b. Supervise the claimants progress while on-the-job training to ensure all objectives are met, of the Federal Government and the claimants.
  - c. Purchase required books, tools, and equipment that are normally required to be owned by the employee and not provided by the employer/training establishment.
  - d. Assume the responsibility of keeping the establishment currently informed of any, and all modifications of the law and the VA regulations affecting the on-the-job training program for claimants with disabilities.
  - e. Terminate on-the-job training for any claimant whose personal conduct or lack of cooperation negatively impacts the Training Establishment, the Department of Veterans Affairs, or the claimant.
3. Additionally:
- a. Each claimant in on-the-job training under this agreement will be supervised by the establishment and will be subject to the same rules and regulations governing the conduct of other comparable employees of the establishment.
  - b. This agreement may be terminated by the establishment or the VA on (15) days' notice.

**CERTIFICATION OF STATEMENT AND SIGNATURE FOR THE ESTABLISHMENT**

**I CERTIFY THAT** I have completed this statement and that the information is true and correct to the best of my knowledge and belief.

4A. NAME AND TITLE

4B. SIGNATURE

4C. DATE SIGNED (MM-DD-YYYY)

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**CERTIFICATION FOR THE DEPARTMENT OF VETERANS AFFAIRS**

5A. NAME AND LOCATION OF VA REGIONAL OFFICE

5B. SIGNATURE OF VETERAN READINESS AND EMPLOYMENT REPRESENTATIVE

5C. DATE SIGNED (MM-DD-YYYY)

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**PENALTY:** The law provides severe penalties (including fine and/or imprisonment) for willfully submitting any statement or evidence of a material fact you know to be false, or for fraudulent receipt of any document you are not entitled to.

**PRIVACY ACT NOTICE:** The responses you submit are considered confidential (38 U.S.C. 5701). Your obligation to respond is required in order to obtain benefits. VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses (i.e., civil or criminal law enforcement, congressional communications, epidemiological or research studies, the collection of money owed to the United States, litigation in which the United States is a party or has an interest, the administration of VA programs and delivery of VA benefits, verification of identity and status, and personnel administration) as identified in the VA system of records, 58VA21/22/28, Compensation, Pension, Education, and Veteran Readiness and Employment Records - VA, published in the Federal Register. Information that you furnish may be utilized in computer matching programs with other Federal or State agencies for the purpose of determining your eligibility to receive VA benefits, as well as to collect any amount owed to the United States by virtue of your participation in any benefit program administered by the Department of Veterans Affairs.

**RESPONDENT BURDEN:** An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control Number. The OMB control number for this project is 2900-0678, and it expires XX/XX/20XX. Public reporting burden for this collection of information is estimated to average 15 minutes per respondent, per year, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate and any other aspect of this collection of information, including suggestions for reducing the burden to VA Reports Clearance Officer at [VACOPaperworkReduAct@VA.gov](mailto:VACOPaperworkReduAct@VA.gov). Please refer to OMB Control No. 2900-0678 in any correspondence. Do not send your completed VA Form 28-1904 to this email address.