



THE STATE
of **ALASKA**
GOVERNOR MICHAEL J. DUNLEAVY

Department of Labor

DIVISION OF VOCATIONAL REHABILITATION

455 3rd Avenue, Suite 150
Fairbanks, AK 99701
Main: (907) 451-3150
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March 22, 2019

NAME: Jane M. Doe
DOB: 12/25/1973

In accordance with the Office of Personnel Management's criteria for a Schedule A appointment, I certify as follows:

The above named individual has a documented disability, identified by the Alaska Division of Vocational Rehabilitation who can be considered for employment under the Schedule A Hiring Authority [5 CFR 213.3102 (u)].

That this person is available for employment.

A certification letter will be completed and submitted to the Federal Personnel Office upon participant's selection for a specific position that they are qualified for.

Sincerely,

Elizabeth K. Markle

Elizabeth K. Markle, CRC
Vocational Rehabilitation Counselor III