

RESIDENT – ONBOARDING CHECKLIST (Page 1 of 2)

Instructions: Complete the required STEPS in the recommended timeframe when possible.
 Return a copy of the completed forms to your VA Point of Contact and keep a copy for your records.
 (Allow 45 days for processing.)



U.S. Department of Veterans Affairs
 Veterans Health Administration:
 Nebraska-Western Iowa Health Care System

	Task	Date Completed
PART 1: 30-45 DAYS PRIOR TO START DATE - TAKES UP TO 3 WEEKS TO COMPLETE THIS STEP	Fingerprint Process - Required for ALL. Fingerprints are the first step to ascertaining a PIV card, which is required for all trainees. Fingerprinting can be completed at the VA or at any other VA in the US. Fingerprint adjudication takes up to 5 days to complete. <ul style="list-style-type: none"> <input type="checkbox"/> At Omaha VA, make an appointment at Https://VA-PIV.com <input type="checkbox"/> Create an account if this is your first time using the system. Select VHA as your "organization" and AFFILIATE as your "Applicant Type" <input type="checkbox"/> Click "Make an Appointment." The zip code for the Omaha VA is 68105. Select "Omaha Division" <input type="checkbox"/> Activity = Fingerprint; Select Date and time for your appointment. <input type="checkbox"/> You will need to bring either a Driver's License or Passport to your appointment. 	____/____/____
	<i>*If making arrangements for fingerprints through another VA, you need to request a courtesy fingerprint for Nebraska Western Iowa Health Care System (NWIHCS), 4101 Woolworth Ave, Omaha, NE 68105. You will need to have the following information: Security Officer Identifier (SOI) # VAF5 and Submitting Office Number (SON) #1445. Be sure to contact the VA office first though to verify their process and availability. *Please contact your VA Program Coordinator upon completion. If Fingerprints were done off-site you MUST let your VA POC know this.</i>	
	TMS Required Training - Required for ALL. You must create an account in the VA's Talent Management System (TMS) and complete assigned training in order to obtain computer and patient access. Please follow directions on the TMS handout to access this website. https://www.tms.va.gov/SecureAuth35/ *This is a yearly requirement. You must contact your VA Department POC EACH YEAR when you complete this requirement to avoid computer access termination.	____/____/____
	VA FORMS <ul style="list-style-type: none"> <input type="checkbox"/> Appointment Letter Also known as Without Compensation (WOC) appointment letter, this form indicates you are not a VA paid employee. Please: 1) Type your first and last name after "Dear", and 2) Sign and date the form <input type="checkbox"/> Application form 10-2850D Please complete all four pages of the application form, then sign on page 3 and page 4. Section IV is completed by the VA department (leave this blank). <input type="checkbox"/> OF-306 This form is entitled "Declaration of Federal Employment" and is required even though you are not applying for employment. Be sure to sign BOTH signature blocks on the last page, items 17A and 17B, as both an applicant and an appointee. <input type="checkbox"/> Appointment Affidavits SF61 Please type your name in the box between "I" and "do solemnly swear (or affirm) that..." print the form, and sign the line for "Signature of Appointee." This form does not need to be notarized. The Program Coordinator will complete the rest of the form on your processing day. <input type="checkbox"/> Sponsor Request Form Please complete for form. Choose only one option for each item (i.e. - race - only one selection can be entered into our system). <input type="checkbox"/> Resident, Fellow & Sub-Intern Info Sheet This sheet provides additional information needed for the processing of your appointment. This must be returned to your department liaison either electronically or in hard copy format. If you are coming from another VA facility, please let your program coordinator know immediately so we may initiate the transfer process. <input type="checkbox"/> VA Form 10-3202 This consent allows for production and use of verbal and written statements, photographs, digital images, and or video or audio recordings by the VA. This consent is needed for residents to produce monthly inpatient team cards (with resident and attending pictures) to provide to inpatients. Print your name, sign your name, and date the bottom of page 2 and return with your onboarding paperwork. <input type="checkbox"/> Pharmacy Signature Card Please complete the form carefully. <ul style="list-style-type: none"> <input type="checkbox"/> The DEA number and expiration date as well as the NPI are very important. <input type="checkbox"/> If you do not have these numbers, you must apply for them immediately and then let your VA program POC know when your number has been assigned. <input type="checkbox"/> Please hand in the form as completely as possible. If you do not have a DEA number, the VA will assign a temporary number to you once your form is received. 	____/____/____

Task		Date Completed
PART 2	VA Internal Onboarding Process - 30 days prior to start date	
PART 3	<p>PIV Sponsoring - Once the VA Internal Processing is complete, you will be contacted by your VA Department POC.</p> <p>A PIV card is your VA identification card and used to access computers. Your VA department must first sponsor you after you have had your fingerprints completed, have completed TSM training, & turned in paperwork.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Once sponsored, the PIV process is by appointment only and you must schedule the appointment at https://VA-PIV.com. Sign in using the email and password you set up when scheduling fingerprints. <input type="checkbox"/> Click "Make an Appointment." The zip code for the Omaha VA is 68105. Select "Omaha Division" <input type="checkbox"/> Activity = PIV Badge - New; Select Date and time for your appointment. (It takes about 20 minutes.) <input type="checkbox"/> You will need to bring two forms of ID - one must have a photo of you. The most common forms of ID include driver's license, passport, SSN card and military ID. 	<p>___/___/___</p>
PART 4	<p>CPRS (Computerized Patient Record System) Computer Training / Class</p> <ul style="list-style-type: none"> <input type="checkbox"/> A 5-hour CPRS training course is required prior to your first VA rotation. <input type="checkbox"/> Please check with your affiliate program coordinator to ensure that you have been scheduled into a CPRS training class through the VA Education Office. This is required even if you rotated at a different VA prior to coming to the Omaha VA. 	<p>___/___/___</p>