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**VAVS & SVH  
GRANDE VOITURE  
CERTIFICATION FORM**

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(PLEASE PRINT OR TYPE ALL INFORMATION)

**TO:** VOITURE NATIONALE  
ATTN: VAVS & SVH CERTIFICATION  
250 E 38<sup>TH</sup> STREET  
INDIANAPOLIS, IN 46205

**FROM:** GRANDE DU: \_\_\_\_\_

**DATE:** \_\_\_\_\_

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**CERTIFICATION TYPE (check one):** VAVS \_\_\_\_\_ SVH \_\_\_\_\_

**APPOINTMENT TYPE (check only ONE):**

Representative \_\_\_\_\_ Deputy \_\_\_\_\_ Recertification \_\_\_\_\_

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_

**STATE, ZIP CODE:** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_

**FAX NUMBER:** \_\_\_\_\_

**NAME OF PERSON BEING REPLACED:** \_\_\_\_\_

**FACILITY TYPE (check ONE):** VA \_\_\_\_\_ State Veteran Home (SVH) \_\_\_\_\_

**NAME:** \_\_\_\_\_

**CITY:** \_\_\_\_\_

**STATE, ZIP CODE:** \_\_\_\_\_

**VA FACILITIES ONLY! VISN:** \_\_\_\_\_ **STATION NUMBER:** \_\_\_\_\_

**Approved By:** \_\_\_\_\_

Grand Chef de Gare / Grand Correspondant