Date

Your Name

Your Function/Title

New York State Department of Labor

Office Name

Street Address, City, State, Zip Code

Dear **Veteran Name**,

Due to your involvement with the U.S. Department of Veterans Affairs (VA) Vocational Rehabilitation and Employment (VR&E) training program, we have scheduled you an appointment for **services as recommended by your VR&E counselor.**

Your appointment is scheduled for:

 **(Date/Time)** at the **(Name &** **Address of the Career Center)**

Please call or visit our office if you are unable to attend. If necessary, we can reschedule your appointment for a more convenient time.

Please complete the enclosed Customer Registration Form, bring it with you to our meeting, and email your resume.

I am looking forward to meeting with you and helping you achieve your career goals!

Sincerely,

**Veteran Staff Name**

**Phone:**

**Fax:**

**Email:**