



DEPARTMENT OF VETERANS AFFAIRS
James A. Haley Veterans' Hospital
13000 Bruce B. Downs Blvd
Tampa, FL 33612

In Reply Refer To: 673/151R

July 1, 2016

Are you or do you know a Veteran or a family member or caregiver of a Veteran who has:

- Good communication skills
- The ability to use his/her own experiences constructively
- Received care (or a family member of someone who has received care at the VA)
- The ability to see beyond his/her own personal experiences
- A desire to bring meaningful change

We are actively seeking Veteran and family volunteers for our Veteran Engagement Council. Members will help us:

- Bring Veteran voices into VA research
- Increase the uptake of research into practice
- Build Veteran support for research

The council term will last two years and members will be asked to attend meetings once per month for two-hours. We are looking for a diverse membership with members varying in age, gender, race, branch(es) of service, and service era.

If you'd like more information, call:

Sandra Winkler at 813-558-3949 (Tampa) or
Kiersten Downs at 813-476-2153 (Tampa) or
Paul Arthur at 386-234-1102 (Gainesville)

If you are interested, please complete the attached information sheet and return to Sandra Winkler:

Scan and email: Sandra.Winkler@va.gov

Fax: 813-558-3991

Mail: CINDRR/JAHVH

attn: Sandra Winkler (673/151R)

8900 Grand Oak Circle

Tampa, FL 33637-1022

Sincerely,

A handwritten signature in black ink that reads "Gail Powell-Cope".

Gail M. Powell-Cope, PhD, ARNP, FAAN
Tampa Co-Director, Center of Innovation on
Disability and Rehabilitation Research
James A. Haley Veterans' Hospital

Veteran Engagement Council Information Sheet

Name:

Gender:

Age:

Race/Ethnicity:

Veteran (check): Y N Branch(es) of Service:

If yes, dates of military service:

I (or family member) have received VA rehabilitation care: Y N Location of VA:

Type of rehabilitation service utilized?

Family member relationship to Veteran (if applicable):

Phone:

Email:

Tell us about yourself (describe briefly, e.g. career/profession/volunteer work/hobbies/personal interests, use a separate page if needed)

Given the purpose of this committee, why are you interested in participating?

Signature

Date

Contact Sandra Winkler for questions at 813-558-3949. Please return information sheet to:

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