



**ATLANTA VETERANS' AFFAIRS HEALTH CARE SYSTEM  
POST-GRADUATE PHYSICIAN ASSISTANT  
PRIMARY CARE RESIDENCY PROGRAM  
2022 ADMISSION APPLICATION**

The below instructions specify the requirements to apply to Atlanta VA Healthcare System's post-graduate physician assistant primary care program. To be considered, the submitted application must be completed in its entirety with all supplemental documents attached.

To be eligible, candidates must be a graduate (or anticipate graduation) from an ARC-PA accredited Physician Assistant Program, receive board certification prior to the residency start date and meet VA technical requirements.

**Upon completion, submit the application electronically to Shelia Palmer, PA-C, MBA, MHA at [shelia.palmer@gov](mailto:shelia.palmer@gov).**

The application packet must include:

1. A one page typed personal statement that describes yourself, your background and why you desire a position in the VA's Post-Graduate Physician Assistant Primary Care Residency program, which places an emphasis on a Patient Aligned Care Team (PACT) approach to care.
2. A current Curriculum Vitae (CV).
3. A copy of current Advanced cardiac life support (ACLS) and Basic life support (BLS) cards.
4. An unofficial transcript from your PA program detailing courses attempted and credits earned.
  - a. If selected, official transcripts will be required and must be sent directly from the registrar's office.
5. Three professional letters of recommendation that support your application to the residency program. **(One letter must be from your program director)**
  - a. Recommendation letters may be sent electronically to either:
    - i. [Shelia.palmer@va.gov](mailto:Shelia.palmer@va.gov)
    - ii. [jane.brisbon-green@va.gov](mailto:jane.brisbon-green@va.gov).

Fiscal Year (FY) 2022 – 2023 Program Calendar	
Important Dates	
<b>Application Submission Window</b>	<b>November 9, 2021 – November 30, 2021</b>
<b>Interview Period</b> <i>Interviews will be held virtually</i>	<b>December 6, 2021 – December 10, 2021</b>
<b>Selection Notification</b>	<b>January 10, 2022</b>
<b>Program Start</b>	<b>April 2022</b>



**Atlanta Veteran Affairs Healthcare System  
Physician Assistant Post-Graduate Residency Program**

**APPLICANT INFORMATION**

Name (Last, First):			
Date:	Date of birth:		
Phone:	Gender:	Male    Female	E-mail:
Current address:			
City:	State:	ZIP Code:	
Have you ever worked for the Veterans Administration before?		YES	NO
Are you a citizen of the United States?	YES	NO	Are you authorized to work in the U.S.?
			YES    NO
Have you ever been convicted of a felony?		YES	NO
If yes, explain:			

**EDUCATION INFORMATION**

<b>High School:</b>			
Address:			
City:	State:	ZIP Code:	
From:	To:	Date of Graduation:	Degree:
<b>College:</b>			
Address:			
City:	State:	ZIP Code:	
From:	To:	Date of Graduation:	Degree:
<b>Physician Assistant Program:</b>			
Address:			
City:	State:	ZIP Code:	
From:	To:	Date of Graduation:	Degree:
NCCPA number:	<b>Expected PANCE date:</b>		
<b>Graduate Training (School Name):</b>			
Address:			
City:	State:	ZIP Code:	
From:	To:	Date of Graduation:	Degree:

**REFERENCES**

List three professional references. Each should submit a letter of support for your application.  
**(One letter must be from your Program Director)**

<b>1. Full Name:</b>		
Relationship:	Company:	Phone:
Address:		
City:	State:	ZIP Code:
<b>2. Full Name:</b>		
Relationship:	Company:	Phone:
Address:		
City:	State:	ZIP Code:
<b>3. Full Name:</b>		
Relationship:	Company:	Phone:
Address:		
City:	State:	ZIP Code:

**PERSONAL STATEMENT**

**I certify that information in this application is complete and correct to the best of my knowledge.**

<b>Signature of applicant:</b>	<b>Date:</b>
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**Please return the completed application and supporting documents by email:  
Attn: Shelia H. Palmer, PA-C, MBA, MHA  
Shelia.palmer@va.gov**