



**(VIP) VETERAN IMPROVEMENT PROGRAM**

\*Sponsored by Medical Professionals for Home Health Care, Inc.

**Employer Support Agreement Form**

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**The Name of Your Company:**

**Representative Name:**

**Address:**

**Company Phone:**

**Email Address:**

**Title:**

**City, State, Zip:**

**Fax:**

**Carmen Adekola  
Executive Director**

Dear Ms. Adekola:

We acknowledge and support MPHHC/VIP's submittal of a proposal to expand or seek continued support of the Veteran Improvement Program for homeless veterans in which homeless veterans are reintegrated into the workforce.

MPHHC/VIP's improvement program has played an invaluable role as an extension of our Human Resource Department in their efforts to assist us with our recruitment needs. We appreciate the benefits MPHHC/VIP provides such as reducing the cost of advertising, on-site recruitment, background checks, pre-screening, and identifying qualified candidates.

We would consider establishing On-the-Job training Agreements with MPHHC/VIP as an added enhancement to hire and train individuals in a particular skill set to meet our needs.

We look forward to continuing our relationship as one of MPHHC/VIP's hiring partners to further build and strengthen our workforce. Through collaborative partnerships, the business industry will assist in our "Pay Back a Vet, Hire a Vet" campaign.

Sincerely,

**Signature Here**