

Schedule A Certification

Date:

To Whom It May Concern:

This letter serves as certification that
is an individual with a documented severe physical, intellectual or psychiatric disability,
identified by the Maryland Division of Rehabilitation Services, and can be considered for
employment under the Schedule A hiring authority (5 CFR 213.3102(u)).

Thank you for your interest in considering this individual for employment. You may
contact me if you need any further information.

Sincerely,

Enclosure: Resume