

DEPARTMENT OF DEFENSE APPLICATION FOR GRADUATE MEDICAL EDUCATION									
THIS FORM IS AFFECTED BY THE PRIVACY ACT OF 1974									
1. AUTHORITY: 10 USC 3012. 2. PRINCIPAL PURPOSE(S): To compile information necessary to evaluate an application for military graduate medical education (GME) training. 3. ROUTINE USES: To evaluate application for professional training in military and civilian facilities (Medical Corps officers only). 4. MANDATORY OR VOLUNTARY DISCLOSURE: Disclosure of requested information is voluntary, however, without it, consideration for GME cannot be accomplished and GME may not be assured.									
1. NAME		2. GRADE/RANK		3. SSN		4. CURRENT SPECIALTY		5. SERVICE	
Last				XXX-XX-				[X] Air Force	
First		Date of Rank						[ ] Army	
MI								[ ] Navy	
6. HOME ADDRESS		7. HOME PHONE		8. COMPLETE DUTY ADDRESS			9. DUTY PHONE		
		CELL:							
		HOME:					EXT:		
10. EMAIL(S):									
11. CURRENT STATUS				12. SPECIALTY OR SUBSPECIALTY REQUESTED					
[ ] MEDICAL STUDENT ([ ] HPSP [ ] USU [ ] ROTC)				Choice:					
[ ] ACTIVE DUTY PGY1 (INTERN))									
[ ] ACTIVE DUTY RESIDENT				2ND CHOICE					
[ ] ACTIVE DUTY FELLOW				13. START DATE REQUESTED		14. PROGRAM LENGTH			
[ ] ACTIVE DUTY FIELD/OPERATIONAL/STAFF				2025					
[ ] DEFERRED/REDEF/FAP (Until Month/Year)				2026					
[ ] OTHER (Specify)									
15. TRAINING									
a. Undergraduate School						COMPLETION OR GRAD DATE			
Major									
Approximate GPA		Honors [ ] Yes [ ] No				Enter dates as MM/DD/YYYY			
b. Medical School Name						COMPLETION OR GRAD DATE			
Approximate GPA		Class Ranking of (If no GPA, use P or F)							
Academic Honors		[ ] Yes [ ] No							
c. PGY1/Specialty		Location				COMPLETION OR GRAD DATE			
d. Residency/Specialty		Location				COMPLETION OR GRAD DATE			
e. Fellowship/Specialty		Location				COMPLETION OR GRAD DATE			
16. LIST OF PGY-1 ROTATIONS AND TIME SPENT IN EACH (Fill out only if you are applying for a residency and did not complete a categorical internship in that specialty. Not to be completed if applying for a fellowship)									
Specialty	# of Weeks	Specialty	# of Weeks	Specialty	# of Weeks	Specialty	# of Weeks		
17. SPECIALTY BOARD CERTIFICATION			[ ] Yes [ ] No If yes, indicate specialty:						
18. MEDICAL LICENSING EXAMINATIONS									
Licensing Exam: [ ] FLEX [ ] NBME/USMLE [ ] NBOME/COMLEX				USMLE ID / NBOME ID					
		Pass/Fail			Date Taken (MM/DD/YYYY) Score				
Step/Level I		Pass Fail							
Step/Level II		Pass Fail							
Step/Level III		Pass Fail							
19. ECFMG (If applicable) Certificate #		Date		Certificate Number:					

NAME (Last, First, MI)		SSN XXX-XX-	
20. POST-PGY1 EXPERIENCE (Last three (3) assignments)			
Duty Station		Duty Title	Dates
21. PARTICIPATION IN FEDERALLY FUNDED PROGRAMS (Check all that apply):			
<input type="checkbox"/> HPSP <input type="checkbox"/> HSCP <input type="checkbox"/> ROTC <input type="checkbox"/> USUHS <input type="checkbox"/> FAP <input type="checkbox"/> Military Academy <input type="checkbox"/> DirectAccession			
22. I POSSESS A CURRENT UNRESTRICTED MEDICAL LICENSE <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes, attach copy of license with this application.)			
23. TRAINING PREFERENCES			
Rank order 1, 2, 3, etc. Service maximum - 8 choices - <b>Applicants should rank all available choices from HPERB for the chosen specialty</b>			
AIR FORCE		ARMY	
	David Grant Medical Center, Travis AFB, CA		Alexander T. Augusta Army Medical Center, Fort Belvoir, VA
	USAF Regional Hospital, Eglin AFB, FL		Eisenhower Army Medical Center, Fort Gordon, GA
	Erhling Bergquist Clinic, Offutt AFB/University of Nebraska, Omaha NE		Madigan Army Medical Center, Tacoma, WA
	Keesler Medical Center, Keesler AFB, MS		NCC – Walter Reed Army Medical Center, WASH, DC/DeWitt Army Community Hospital, Fort Belvoir, VA/National Naval Medical Center, Bethesda, MD/Malcolm Grow Medical Center, Andrews AFB, MD/USUHS
	Mike O'Callaghan Federal Hospital, Nellis AFB, NV		
	NCC- The National Capital Consortium (Walter Reed National Military Medical Center), Bethesda, MD Includes NCC, Fort Belvoir Community Hospital and USUHS		
	SAUSHEC (Wilford Hall Ambulatory Surgical Center/San Antonio Military Medical Center)		SAUSHEC-Brooke Army Medical Center, Fort Sam Houston, TX/ Wilford Hall Medical Center, Lackland AFB, TX/University of Texas, San Antonio, TX
	Scott AFB/St. Louis School of Medicine (Belleville) Program, Belleville, IL		Tripler Army Medical Center, Honolulu, HI
			William Beaumont Army Medical Center, El Paso, TX
	Wright-Patterson Medical Center/Wright State Univ, Dayton, OH		Womack Army Medical Center, Fort Liberty, NC
			Carl R. Darnall Army Medical Center, Fort Cavazos, TX
	USAFSAM (RAM — Wright Patterson AFB, OH)		Martin Army Community Hospital, Fort Moore, GA
			Keller Army Community Hospital, West Point, New York
	Civilian Sponsored		<b>AFFILIATED PROGRAMS</b>
	Civilian Deferred/Redeferred (Non-funded); rank even if not offered on HPERB if you are interested		University of Texas Health San Antonio, San Antonio, TX
			University of Alabama at Birmingham, Birmingham, AL
			Denver Health, Denver, CO
	<b>NAVY</b>		University of Colorado, Denver , CO
	Naval Medical Center, Portsmouth, VA		
	Naval Medical Center, San Diego, CA		<b>OTHER</b>
	Naval Hospital Bremerton, WA		Uniformed Services University of the Health Sciences (Non-Clinical)
	Naval Hospital, Camp LeJeune, NC		
	Naval Hospital, Camp Pendleton, CA		Armed Forces Institute of Pathology
	Naval Hospital, Jacksonville, FL		<b>OPERATIONAL GME</b>
	Naval Hospital, Pensacola, FL		Albert Einstein Healthcare Network, Philadelphia, PA
	Naval Aerospace Medical Institute, Pensacola, FL		Saint Louis University, St Louis, MO
			Mercy St Vincent, Toledo, OH
	NCC - National Naval Medical Center, Bethesda, MD/Walter Reed Army Medical Center, WASH, DC/DeWitt Army Community Hospital, Fort Belvoir, VA/Malcolm Grow Medical Center, Andrews AFB, MD/USUHS		Virginia Commonwealth University, Richmond, VA
			The Ohio State University, Columbus, OH
			University of Alabama at Birmingham, Birmingham, AL
			University of Arizona, Tuscon, AZ
24. (Enter Y or N. All Y answers must be explained in Item 26)			
<input type="checkbox"/> Have you ever been convicted of a misdemeanor?			
<input type="checkbox"/> Have you ever been convicted of a felony?			
<input type="checkbox"/> Have you ever been disciplined for student conduct violations (e.g., academic probation, dismissal, suspension, disqualification etc.) by any college or school?			
<input type="checkbox"/> Have you ever been disciplined for academic performance (e.g., academic probation, dismissal, suspension, disqualification etc.) by any college, school or internship/residency program?			

APPLICANT'S NAME	DATE
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**26. Additional Comments or Explanations (Identify the item number and explain in this space)**

- 1) Form must be typewritten. Hand written forms will not be accepted.
- 2) Form must either include a time dated digital signature or a wet signature.
- 3) Save file with the following naming convention: lastname\_firstname\_App.pdf
- 4) A separate CV must be submitted with your application. CVs must be in pdf format using the following naming convention: lastname\_firstname\_CV.pdf
- 5) For a 2nd choice specialty, include an additional application with only the following blocks completed: 1, 2, 3, 12, 13, 14, 23, and 25
- 6) Email completed form(s)/CV to [AFPC.DPMNP.PhysicianEducation@us.af.mil](mailto:AFPC.DPMNP.PhysicianEducation@us.af.mil)
- 7) Applications will be accepted from 1 July 2024 - 31 August 2024. No late submissions will be accepted.