

## Message from the Branch Chief

To all the AFHPSP applicants:

As you embark upon your application for future training, I want congratulate you for successfully completing most of your medical education. You are among the best and brightest physicians in our nation and we are proud that you have chosen to serve in the Air Force Medical Corps. We stand ready to assist you in any way we can to help you make the best decisions about your future career.

Every year, the Air Force projects how many physicians in each specialty are required to meet the needs of the Air Force Medical Service (AFMS). This process, called “forecasting”, is completed in June of each year by the Integrated Forecast Board (IFB). The number of physician requirements forecasted for each specialty is posted on our web page, along with the number of training positions that will be available at this year’s Joint Service GME Selection Board (JSGMESB). As is the case nationwide, some specialties are more competitive than others. Our most popular specialties are Anesthesiology, Radiology, and Emergency Medicine and these specialties will be more competitive compared to the primary care specialties such as Internal Medicine, Family Medicine, and Pediatrics. If non-selected for your specialty choice, you will be offered a PGY 1 only training contract in Transitional Medicine, Internal Medicine or General Surgery. Completing your PGY 1 year ensures that you are eligible to take and pass USMLE/COMLEX Step 3, and obtain a valid, unrestricted, state medical license according to the terms of your contract.

- ❖ You must apply to, and be selected by, the 2007 JSGMESB to enter a Graduate Medical Education program in 2008. If you are not selected for the specialty of your choice, you will be approved to enter a PGY-1 only internship, in Transitional Medicine, Internal Medicine or General Surgery. You may re-apply to the 2008 JSGMESB for specialty training beginning in 2009, or you may serve an operational tour in Flight Medicine after completing a PGY 1 year. The training opportunities available at the JSGMESB are specific. For instance, if you have been selected for a 5 year General Surgery residency you may not enter a program that requires a sixth research year unless approved to do so by my office. Similarly, if you are offered a PGY 1 only internship year in Transitional Medicine, Internal Medicine or General Surgery, you may not start a program in Pediatrics or Emergency Medicine simply because a civilian program is willing to offer you a position.
- ❖ You should enter the National Residency Match Program (or Osteopathic equivalent) beginning 1 July 2007. You must withdraw from the match if selected for training in an active duty program by the JSGMESB.
- ❖ GME selection for categorical residency training is contingent upon successful completion of USMLE/COMLEX Step I and Step II. Passing Step II Clinical Skills will be a requirement for the 2008 JSGMESB, however passing Clinical Skills Step II for this year’s 2007 JSGMESB will only improve your application.
- ❖ All applicants must complete an active duty tour. The active duty tour in a clinical specialty enables you to meet the JSGMESB interview requirement. If you apply for a different specialty than your active duty tour, you will need to complete an interview (preferably in person) with one active duty (Air Force) Program Director in that specialty. Applicants applying to Neurosurgery must interview with the Air Force Neurosurgery Consultant as there is no Air Force Active Duty Program.

- ❖ Air Force Program Director/Consultants may only review a copy of your DOD application and CV. They may not request additional materials such as photographs, essays, or letters of recommendation.
- ❖ JSGMESB deadlines are firm. Late applications will be returned without action and will not meet the board. Fax or emailed copies of the JSGMESB application will not be accepted by DPAME.
- ❖ The application essay is your opportunity to tell the selection panel why you are applying for that specialty. We know you chose a career in medicine so don't waste space repeating why you wanted to become a physician. Focus on the specialty you have chosen. Use the last paragraph to identify extenuating circumstances. Examples: Married to another military medical student, illness of a family member and requesting deferment. Provide supporting documentation with your essay to support your request (marriage certificate or a letter from a doctor documenting an illness in your family). Simply stating that you have a fiancée for instance, will not qualify you for any special consideration. Follow the format guidelines (length, font...) or we will ask you to retype your essay.

These remarks are meant to highlight some key points. There is additional detailed information in the instructions accompanying your application. Please work closely with the Medical Student Program Manager, Mr. Matthew Kush, (210) 565 0656, 1-800 531 5800 Ext 5. My deputy, Ms Dayan Geiger, or I, will be happy to speak with you as well, (210) 565-2638/9, 1-800 531 5800.

I wish you the best of luck with your application and future training endeavors!

Original Signed  
MOLLY J HALL, Col, USAF, MC, FS  
Chief, Physician Education Branch

**United States Air Force  
2007 Joint Service Graduate Medical Education Selection Board (JSGMESB) Application**

HQ AFPC/DPAME 550 C STREET WEST STE 27 RANDOLPH AFB, TX 78150	Medical Student Program Manager: Toll free (800) 531-5800 ext 5 Comm (210) 565-0656, DSN 665-0656
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**JSGMESB Application Timeline**

<b>Core Application Deadline</b>	<b>Immediately</b>
<p>Core Application Deadline</p> <p>1. DoD 2-page Application for GME <i>Submit this form asap. Do not wait until deadline – it can be mailed alone, while you continue to gather and submit the remainder of core application items by <u>7 Sept</u> (see below).</i></p>	
<p>2. (DoD Application, Curriculum Vitae (CV), Second Choice, PG1 Only, Statement of Understanding, Race/Ethnic voluntary disclosure, Education Summary, and personal essay.</p> <p>1. Early submission to AFPC/DPAME is encouraged.</p> <p>2. Ensure you only mail a copy of the 2-page DoD application and CV to the active duty program director(s) in the specialty(ies) you are applying for.</p> <p>3. <b>Incomplete Core application documents received by AFPC/DPAME will not be accepted and the applicant will be required to re-accomplish the document.</b> (See the JSGME instruction package on how to fill out these documents ).</p>	<b>7 September 2007</b>
<b>Weight Statement</b> <b>(Note mandatory weigh in dates)</b>	<b>Weigh in 2 - 5 October 2007</b> <b>Submit by 12 October 2007</b>
Two original letters of recommendation with signatures and dates	<b>5 October 2007</b>
Dean's Letter released	<b>1 November 2007</b>
Dean's letter and transcripts due to DPAME It is the medical students responsibility to ensure the Deans Letter is received by AFPC/DPAME by 9 November 2007.	<b>9 November 2007</b>
<b>Last Day for Location Preference Changes</b> <b>1. All Changes Must Be In Writing and Faxed to 210-565-2830. Please call to confirm receipt.</b> <b>2. No Changes Will Be Made By Telephone or e-mail.</b>	<b>1 November 2007</b>
Interviews completed	<b>26 October 2007</b>
DOD Interview Sheets to DPAME (submitted by interviewer)	<b>2 November 2007</b>
Step 1 and Step 2 board scores to DPAME	<b>2 November 2007</b>
Joint Service GME Selection Board Convenes	<b>26 Nov – 30 Nov 2007</b>
Verbal Results Released To Applicants Results Will <u>NOT</u> Be Released Before This Date	<b>12 December 2007</b>
<b>Written Notice to All Applicants</b>	<b>31 January 2008</b>

## JSGMESB Checklist for Success

This checklist outlines all documents required to complete the JSGMESB application. Please review the JSGMESB Overview and Application Guidance sections for detailed instructions on each requirement.

### **Core application documents (due 7 September 2007)**

- \_\_\_\_\_ 2-page DoD application (mail this first to DPAME, as soon as possible)
- \_\_\_\_\_ PG1 Only
- \_\_\_\_\_ Curriculum Vitae
- \_\_\_\_\_ Personal Essay
- \_\_\_\_\_ Educational Summary
- \_\_\_\_\_ Second Choice form
- \_\_\_\_\_ Statement of Understanding
- \_\_\_\_\_ Race/Ethnic Voluntary Disclosure

### **Supporting documents**

- \_\_\_\_\_ Step 1 scores (Due 2 November 2007)
- \_\_\_\_\_ Step 2 scores (Due 2 November 2007)
- \_\_\_\_\_ Dean's letter (Due 9 November 2007)
- \_\_\_\_\_ Official copy of medical school transcript (Due 9 November 2007)
- \_\_\_\_\_ Two personal letters of recommendation (Due 5 October 2007)
- \_\_\_\_\_ Weight statement (due 12 October 2007)
- \_\_\_\_\_ Program Director interview (Active Duty Tour), complete by 2 November 2007  
(interviewers forward directly to DPAME)
- \_\_\_\_\_ Last Day to make location training preference changes to DOD application by fax to  
COMM: 210-565-2830. (1 November 2007).

## Section I: Application Instructions

**Please read all instructions prior to completing any part of the application package. Compliance with these instructions will expedite the processing of the application and afford the opportunity for GME selection.**

### **What is the Joint Service Graduate Medical Education Selection Board (JSGMESB)?**

The JSGMESB is a Joint Board comprised of program directors and specialty consultants from the Air Force, Army, and Navy that convenes annually to select physicians for graduate medical education training programs. The Air Force selects individuals for training based on training requirements established by the annual Integrated Forecast Board (IFB).

### **Training Opportunities**

The Integrated Forecast Board (IFB) convened 25 June 2007 and identified GME training opportunities based on Air Force requirements. Only apply for training in specialties that have training requirements identified. If a desired specialty is not listed in the IFB results, do not submit a GME application for that specialty. Training in excess of IFB requirements is not likely. For example, if the Air Force has three funded slots at an Air Force location, those three positions will typically be the only ones filled. Even if the Army or Navy has vacant slots in that specialty, applicants will not be considered for these training locations if the Air Force has filled their IFB requirements and funding allocations. Please note that Air Force programs must be filled prior to granting deferments or training in an Army/Navy program. Please call Physician Education if you are interested in exploring options for training at an Army or Navy location.

An applicant may not enter GME unless he/she has applied to and has been approved for training by the GME Selection Board. The results of the IFB indicate a specific start year for training. Some training is approved two years in advance, called “pre-select” positions. Pre-select specialties, such as Radiology or Anesthesiology, have an attached clinical internship year. Please pay particular attention to the specific start dates and length of training identified by the IFB.

Download and complete the application on your personal computer. Print the completed application and return the original, signed copy to DPAME. Do not change the format of any forms or try to submit this application electronically or via email. Compliance with these instructions will expedite the processing of your application and afford the applicant the opportunity for selection for GME. All GME documents must be typed. Handwritten documents will be returned without action.

### **General Instructions**

1. AFHPSP students and ROTC ED-Delay status individuals are required by contract to submit a GME application to the JSGMESB. If you are an HPSP or AFROTC Educational Delay students and you fail to submit an application it may result in your benefits being suspended. Failure to submit an application may result in the consideration for a PG1 only year.
2. The GME application will be in two parts. Part I, the Core Application and Part II, supporting documents. Please refer to the timelines of when each document is due to ensure timely processing of the application.

## **Types of Training**

Types of training include sponsored and non-sponsored training. Non-sponsored (unfunded) training is called Deferred training. Sponsored (funded) training includes active duty training facilities and civilian sponsorship. An explanation of each type of training is listed below.

### **Active Duty (Sponsored) Training**

Applicants selected for active duty programs incur an obligation for the length of training, year-for-year commitments to be served concurrently with the remaining AFHPSP, AFROTC, or US Air Force Academy commitment. In some instances where the commitment for the program is longer than the sponsorship commitment, applicants will incur the extra obligation; for example, applicants that have a 3-year HPSP commitment and are selected for a 5-year General Surgery program will have that 3-year commitment but will incur an additional year for training. Per US Code, Title 10, the PG1 year in an active duty program does not incur any commitment.

### **Deferred (Non-Sponsored) Training**

Often, Air Force training requirements exceed the availability of sponsorship. For certain specialties, an option may be available to request training in deferred status at a civilian training facility. There is no additional obligation for training in deferred status. Applicants selected for deferred training are assigned to the Inactive Obligated Reserves, considered in a leave of absence status during training, with a remaining obligation to the Air Force for costs expended during your medical school (and/or college for ROTC or USAF Academy) education. If you are selected for a civilian deferment, you receive a salary from the training institution. If selected for deferred training, there will be instructions regarding required documents in the official JSGMESB selection letter.

Physicians applying to civilian training programs do not need an acceptance letter prior to the GME Selection Board. Individuals may negotiate with Program Directors prior to the Selection Board, but must make it clear to each Program Director that acceptance of any training offer is contingent upon official written notification by the Air Force following the GME selection board. Applicants negotiating with their current Program Director or other programs that have a tentative offer in writing may submit a "Good Faith" letter for inclusion with their application. This letter does not guarantee selection but shows the board that should you be selected, you have secured a program. Civilian programs are limited to the continental United States.

### **Civilian Sponsored Training**

Applicants selected for civilian sponsored training will enter active duty, be assigned under the command of the Air Force Institute of Technology (AFIT), and will receive an Air Force salary and active duty benefits. Civilian Sponsored Residents will incur a consecutive ADSC for participation in a civilian sponsored program. This ADSC will be equal to the length of the training and added to any existing ADSC the student may have. Applicants who have been offered and have accepted civilian sponsorship are encouraged to seek positions in programs which have affiliations with Veterans Administrations facilities.

Civilian sponsored physicians are prohibited from receiving a salary, stipend, or other monetary benefits from the institution for his/her services as a resident or fellow. DOD and Air Force Instructions prohibit off duty employment while in GME training, regardless of the civilian institution's policy.

If selected for Civilian Sponsorship, the applicant has until 14 April 2008 to secure a program and submit the required documents to DPAME. There will be additional instructions in the JSGMESB offer letter.

### **Training in an Army, Navy, or Federal Training Facility**

Training in an Army, Navy, or other Federal institution requires funding from the Air Force. If the 2007 IFB authorizes an Army or Navy facility as a training location, an applicant is able to request consideration for placement at that facility on page two of the JSGMESB application. If a specialty is soliciting “civilian sponsorship” as a training location, the applicant may request consideration for an Army, Navy or a Federal institution under the Air Force funding provided there is program capacity. If the IFB did not authorize placement in another facility or if civilian sponsorship is not available to convert to an Army/Navy facility, then the applicant will not be considered for placement outside of the IFB authorizations as funding will not be available.

### **Listing Training Preferences Locations**

Even if an applicant is requesting civilian deferment or civilian sponsorship as their first location preference, medical students must rank at least one active duty Air Force training location and interview with their first choice active duty program director. Applicants are encouraged to rank all Air Force programs to maximize selection and placement opportunities. Additional instructions are included in Section II.

### **Training in an Accredited Program**

Applicants must request training in specialties reviewed and approved by the Accreditation Council for Graduate Medical Education (ACGME) or the American Osteopathic Association (AOA). Applicants may apply for dual programs approved at the Integrated Forecast Board (IFB) only. (a copy of the IFB results is posted on this web page). Applicants are encouraged to review the current edition of the Directory of Graduate Medical Education Programs for allopathic programs and information published by the AOA for osteopathic training programs.

### **Entering the Civilian Match**

**NOTE: IF AN APPLICATION IS SUBMITTED THROUGH THE ELECTRONIC RESIDENCY APPLICATION SERVICE (ERAS), APPLICANTS MUST ALSO COMPLETE THIS APPLICATION FOR GME.**

Applicants should enter the National Residency Match Program or osteopathic equivalent. If selected for an Air Force residency program, applicants must withdraw from the match and notify the medical school office. The school should be informed immediately upon release of the Air Force GME Selection Board results by HQ AFPC/DPAME. The board release date is 12 December 2007.

**Active Duty Service Commitments (ADSC’s)**

ADSC’s are governed by US Code, Title 10 and AFI 36-2107 and vary depending on the length of sponsorship. ADSC’s cannot be fulfilled while in training and are calculated based on completion dates.

Individuals selected for active duty programs incur year for year commitment for those programs after the internship year, to be served concurrently with the AFHPSP, AFROTC or USAFA commitment. In rare instances where the commitment for the program is longer than the scholarship commitment, applicants will incur the extra commitment. **EXAMPLE:** Students who have a 3-year AFHPSP scholarship and are selected for a 5-year surgery program. After completion of the surgery program, the student will have a 4-year commitment for the program and will incur the additional one-year payback.

**ADSC for General Surgery Training**

Due to the different lengths of training for General Surgery programs, the Chart below outlines the ADSC’s associated with training lengths for general surgery residency training.

**Training Length Completion Dates**

	<b>Deferred (5 years) 30 June 2013</b>	<b>WPAFB/Keesler (5 years) 30 June 2013</b>	<b>David Grant/SAUSHEC (6 years) 30 June 2014</b>
USAFA/USUHS 12 years ADSC	IAW title 10, not eligible for deferment upon USUHS graduation	29 June 2025	29 June 2026
AFROTC/USUHS 11 years ADSC	IAW title 10, not eligible for deferment upon USUHS graduation	29 June 2024	29 June 2025
USAFA/AFHPSP 9 years ADSC	29 June 2022	29 June 2022	29 June 2023
AFROTC/AFHPSP 8 years ADSC	29 June 2021	29 June 2021	29 June 2022
USUHS 7 years ADSC	IAW title 10, not eligible for deferment upon USUHS graduation	29 June 2020	29 June 2021
**AFHPSP (4yrs))	29 June 2017	29 June 2017	29 June 2019
**AFHPSP (3 yrs) OR AFHPSP (2 yrs) 3 yr MTOS	29 June 2016	29 June 2017	29 June 2019

Notes:

\*\* Incurs additional ADSC for sponsored training

1. In the event incurring additional ADSC is a consideration factor for you, **DO NOT** rank programs that will result in extending your current obligation
2. Ranking programs indicates you are willing to incur the additional ADSC as indicated above for the sponsored training.
3. Reminder, you will be required to enter training if you rank and are selected for training programs approved by the JSGMESB.

**Active Duty Tours (ADT's) and Interviews**

All medical students are required to complete an active duty tour, which doubles as their interview. Please see further guidance about ADT's and interviews in Section II.

**Moonlighting**

In accordance with the Department of Defense Policy and AFI 44-102 applicants are not authorized for off-duty employment, i.e. "moonlighting," during the GME training. Obligated Air Force officers are required to comply with all Department of Defense and Air Force regulations. In some instances these requirements vary from non-obligated Air Force peers.

**Licensure Policy**

Individuals selected for PGY1 only must take Step 3 and provide DPAME a passing score by 30 Mar 2009. Please plan accordingly as different states have different requirements and refer to the testing websites for the upcoming schedules and registration requirements: MD's: <http://www.usmle.org/> and DO's: [www.nbome.org](http://www.nbome.org). Please plan accordingly to allow sufficient time for study and receiving test results (approximately 6 weeks). Individuals selected for a categorical residency must possess a current, valid, unrestricted state medical license before completion of their 2<sup>nd</sup> post graduate year.

**After Residency**

If selected for training by the JSGMESB, physicians will be required to work in a clinical capacity (in the specialty to which they trained) for two years after GME completion, unless the Air Force Surgeon General waives this requirement due to the needs of the AF mission.

**Reserve Component Health Risk Assessment (RCHRA)**

The Reserve Component Health Risk Assessment form will be provided to you by AFIT. It must be completed by your applicant's primary care provider (a fully licensed M.D. or D.O.). Current residents, fellow medical students, nor family members who are physicians will meet this requirement. Completed RCHRA must be returned to the following address no later than **15 August 2007:**

AFIT/ENEM  
2275 D Street  
Bldg 16, Room 120  
Wright Patterson AFB. OH 45433-7221

**NOTE:** RCHRA must be sent to AFIT only. Sending the RCHRA to DPAME will cause unnecessary delays in obtaining AETC/SG's medical disposition.

AFIT will forward the RCHRA to HQ AETC/SG to determine a final medical disposition. In some instances, HQ AETC/SG may need additional medical documentation in order to make a final determination. Submitting this documentation in a timely manner is important.

Medical clearance by HQ AETC/SG is a requirement prior to the board convening. Applicants not medically qualified prior to meeting the JSGME board could possibly be non-selected for residency training and receive a PGY 1 only in Transitional Medicine, Internal Medicine or General Surgery.

## Section II: Required Elements for the HPSP GME Application

**Please read all instructions before completing any part of the application. Applicants must comply with all requirements if they wish to be considered for GME selection.**

All elements of the GME application must be typed. No handwritten documents will be accepted by the GME board. Mail the following documents to:

**Graduate Medical Education Selection Board  
HQ AFPC/DPAME  
550 C Street West Ste 27  
Randolph Air Force Base, Texas 78150-4729**

### General information

a. Submitted application materials are for JSGMESB and DPAME use only. Copies will not be furnished to the applicant or other agencies. Please plan accordingly if/when applying to or accepting offers from civilian institutions that requires a separate application process. Applicants are reminded they should keep a copy of their application package (if scheduled to be away from home for any reason), DPAME will not provide applicant's, interviewers or other agencies a copy.

b. Applicants are strongly encouraged to submit the 2-page DOD application immediately; the remaining core application documents can follow by the **7 September 2007** deadline. This will enable DPAME to identify the applicant's intentions of applying to the JSGMESB and generate an itemized checklist for the applicant. Applications received in July and August will have a quicker turn-around time (less than 1 week) than applications received in September. If the applicant waits until the deadline week to submit the core application then it will take DPAME 2 to 3 weeks to generate an initial checklist.

c. Program Directors are strictly prohibited from hand-carrying GME applications or supporting documentation to the board. Please ensure the original application is received by DPAME on or before **7 September 2007**. Please do not delay in sending an application, late applications may result in the selection of a PGI only year. Please be advised that overnight Federal Express may not guarantee that documents will arrive overnight or in 24 hours, as it will be delivered to up to 2 additional places prior to being received by DPAME.

d. Supporting application documents not received at HQ AFPC/DPAME by **5 October 2007** may not be considered by the JSGMESB.

e. Please print application and supporting documents on plain, white bond paper. Do not print the documents on front/back. Forms must be placed in specific areas in the application file and the front/back feature will not allow for separating the documents.

f. This is a Tri-Service Board, all forms must be standardized when downloading from your email or the AFMS website. Do not change, alter, or deviate from the original format including the Curriculum Vitae.

*If you have any questions or comments, please feel free to contact the Medical Student Program Manager, at (210) 565-0656, DSN 665-0656 or 800-531-5800.*

**CORE APPLICATION** must arrive to DPAME NLT **7 September 2007\*** and consists of:

1. DOD JSGMESB Application (submit the 2 page application as soon as possible) Must print on 2 pages
2. PG1 Only Form
3. Curriculum Vitae (CV)
4. Personal Essay
5. Education Summary
6. 2<sup>nd</sup> Choice Form
7. Statement of Understanding
8. Voluntary Disclosure Statement

*\* Please note, ensure that you meet the application deadlines. Late application may not be considered for your specialty of choice.*

### **Contact Information**

Applicants should notify DPAME of any changes in contact information to ensure timely receipt of documents and application status. In order to expedite notifications and delivery, DPAME sends electronic checklists to applicants regarding application status. The applicant is able to include up to 3 email addresses with the application to ensure timely receipt of notifications.

### **DOD Application**

- a. The DOD application and supporting documents must be typed and printed on one side only on plain white bond paper.
- b. This form is being used by ALL participating services – Air Force, Army and Navy. Most items are self-explanatory. Complete sections 1 through 15.
- c. Item 12 must reflect your first specialty training choice only. If you have a second choice, indicate this in the appropriate block on the Second Choice Form enclosed. It is important to note that Requests for Change in Specialty will only be accepted between 17 Sep 07 through 15 Oct 07 **if the desired specialty is still open** for those additional 30 days.
- e. Items 17 & 18 are self-explanatory. Your application must contain copies of USMLE or NBOME - Steps 1 and 2 scores. The checklist provided to you by DPAME upon receipt of your application will reflect which, if any, of these are required. Items 19 and 20 are not applicable.
- f. Item 23a - TNG PREFERENCES. As an Air Force applicant, you are approved to request up to a maximum of 6 location preferences. Note the difference between applying for Deferred or Civilian Sponsored status (please see section I for detailed descriptions of training statuses). **Important note: Even if an applicant is requesting civilian deferment or civilian sponsorship as their first training preference, medical students must rank at least one active duty location and interview with their first choice active duty program director. Applicants are encouraged to rank all active duty locations to maximize selection and placement opportunities.**

**PG1 only form (due 7 September 2007) This form has two parts:**

Part 1. Applicants not selected for either the first or second choice for categorical residency training must indicate to the Selection Board if they wish to be considered for a one year active duty program or not. Applicants are not required to rank all three PG1 specialties for active duty programs but should only numerically rank the programs they are interested in. When making a selection of Internal Medicine, General Surgery or Transitional, don't forget to rank order the location preference below each PG1 numerically. Applicants who do not wish to be considered for one year of training at an active duty location, indicate this in item one, and, unless applying for a pre-select specialty, sign and date the page.

Part 2. Individuals applying for a pre-selected position at an active duty location must indicate what preliminary year they would like to do. Please number the choices. Example of pre-selected specialties are Radiology, Neurology, Anesthesiology, Ophthalmology and Urology. Individuals pre-selected for training will be given a preliminary year at the same location as the specialty training.

**Curriculum Vitae (CV)**

The applicant is required to use the GME format. This application is meeting a tri-service board and must be standardized. **Please follow this format exactly.** Do not modify (i.e. change fonts/pitch, remove dividing lines, re-arrange sections, etc.) or your CV may be returned for corrections. If a section does not apply to you, example "military spouse" then put "N/A" under that section.

**Personal Essay**

Required from all applicants; must be no more than 1 page (double spaced, Times New Roman, 10-12 pitch). Essays not following this format will be returned for correction. The Selection Board is greatly influenced by this essay. Using a three to four paragraph concept, outline specific personal/professional plans and goals, why you want to train in a particular specialty, and what strengths you bring to that specialty. If the applicant has any extenuating circumstances for the board to consider, please briefly list in the last paragraph. Examples of extenuating circumstances are marriage to a member of the Air Force or another service (copy of marriage license and spouse's orders will be required); spouse is in a training program not affiliated with the Air Force (copy of marriage certificate and statement from training program required), parent with a terminal illness or spouse/child with special medical needs (medical documentation from treating physician with a diagnosis and prognosis required), etc. Individuals should also mention extenuating circumstances during their interview. This is an opportunity to communicate with the board members: Don't Waste It!

**Education Summary**

Data requested is supplementary information to that of the DOD Application Form. It is self-explanatory. Additional instructions are on the form. It must be included as part of your core application.

**Second Choice Form**

This form must be filled out by all applicants and requires a signature. Second choice refers to specialty only. If applicants do not have a second choice for specialty, no further action is required after filling out item 1 and signing. **Completion is mandatory.**

**Statement of Understanding**

Read, sign, and date this page. Signature is mandatory

**Voluntary Disclosure Statement**

This form is required to be submitted to DPAME, however disclosure is voluntary. The information on this form is used for statistical analysis only.

**SUPPORTING DOCUMENTS** consists of:

1. USMLE/COMLEX Step 1
2. USMLE/COMLEX Step 2 (Clinical Knowledge)
3. Deans Letter
4. Official Copy of Medical School Transcript
5. Two personal Letters of Recommendation
6. Weight Statement
7. Program Director Interview

**Current, Personal Letters of Recommendation**

Letters must be originals with original signatures written/dated within the current calendar year (2007). Letters from previous applications will not be used and have been discarded. Carefully consider who will submit a letter of recommendation. If the applicant submits more than two letters, the first two letters received will be used and the extra letter(s) will be discarded. Do not request more than two individuals to send in letters and later requests to “switch out” letters will not be granted. Faxed letters will not be accepted.

**USMLE/COMLEX Scores**

Applicants must include a copy of Step I and Step II of the USMLE or COMLEX with the application. Step II, Clinical Knowledge (CK), is mandatory for the GME application. You must take Step II CK by 15 September and submit a copy to DPAME no later than **2 November 2007**. Keep in mind that it takes approximately 6 weeks to receive results. **If students fail either step of the exam, they must submit a copy of the test scores for full disclosure and provide the date they are scheduled to retest.** Note: See [www.usmle.org](http://www.usmle.org) or [www.nbome.org](http://www.nbome.org) for current examination schedules and fees.

Note: Selection for a full length residency is contingent upon passing Step II, CK.

**Official Medical School Transcript (due 9 November 2007)**

The official transcript must be sent from the school directly to DPAME.

**Dean's Letter (due 9 November 2007)**

The official Dean's Letter must be sent from the school directly to DPAME. Medical School Deans nationally release the official Dean's Letter on 1 November 2007 for all medical students. Applicants should insure that a Dean's letter is sent to HQ AFPC/DPAME for inclusion in the application. This document is extremely important to the application.

Many schools mail the Dean's Letter and transcript at the same time. This is acceptable; however, applicants may wish to have the transcript mailed separately to ensure it is included in the application package for the selection panel to review. Absence of these documents may result in the selection panel having insufficient information to select individuals for full specialty training. It is the applicants' responsibility to make sure the Dean's Letter and transcripts have been received in this office no later than **9 November 2007**.

**Weight Statement (Weigh in 2 - 5 October 2007 and submit NLT 12 October 2007)**

All applications must contain the weight statement. THIS IS NOT A VOLUNTARY DISCLOSURE STATEMENT. Weight must be certified by ROTC unit personnel, active duty medical facility, MTF or health services at the medical school. If applicable, please attach a copy of the Body Fat Measurement (BFM). If the applicant is unable to comply with these dates, please contact DPAME for guidance. Be sure the certifying official signs and dates the statement. Please include the office symbol and location with phone numbers of the place where the test was taken. Please refer to the **USAFAI 36-2002 page 9** if you need to know what the current height and weight standards are for Air Force officers. The following is the website for the USAFAI 36-2002: <http://www.e-publishing.af.mil/pubfiles/usafa/36/usafai36-2002/usafai36-2002.pdf>.

**DOD (Air Force Program Director) Interview**

This form is not included with this package, as it has already been forwarded to all Air Force Program Directors/Consultants. The intent of the interview sheet is for Program Directors to assess the applicant's qualifications for selection in the requested specialty.

It is **MANDATORY** that all applicants contact at least one active duty Air Force program director in the specialty they are applying for to complete a 30 day active duty tour prior to **26 October 2007**. You must complete one active duty tour with the program director at the first active duty location preference for your specialty of choice. Interviews will not be conducted via telephone unless the program director and AFPC/DPAME authorize it. The active duty tour is considered your interview. In addition, applicants are **REQUIRED** to send a copy of the 2-page DoD application and CV (**only**) to each Air Force program director in the specialty for which applying. **(In the event that additional documentation is requested by the program director, individuals should contact DPAME. The program directors have been advised that applicants are only authorized to provide the CV and 2-page DoD application).** All application documents will be provided to the program directors at the time of the JSGMESB. Providing the 2-page DoD application and CV is extremely important, even if applicants desire to train in a deferred location. Keep in mind, the program directors are the board members who will be selecting individuals for specialty training and location. The more familiar he/she is with applicant's desires at the time the board meets, the better chance the applicant has of getting what they want. A list of directors of medical education and program directors can be found on this web site as well at the following link (please note, due to Privacy Act regulations, names are not posted on the website, however, the contact information will direct applicants to the appropriate person): <http://www.airforcemedicine.afms.mil/afphysicianeducation>

If the applicant has made attempts to contact the appropriate person and is having difficulty, please contact DPAME for assistance.

### **Section III: 2007 JSGMESB Application Forms**

Notes:

1. It is strongly recommended to mail this form in first (as soon as possible), but no later than deadline of **7 Sept 2007**. Once this form is received, your program manager can begin processing your application, and email your GME checklist to you.
2. Ensure your name/social security number is listed the top of page 2 of the JSGMESB application.
3. Remember to print all application documents on white bond paper, one side only. Documents that are printed on front/back will be returned without action.
4. Please do not alter or delete sections of the CV. All sections are required, even if it does not apply to you. If a section, such as military spouse, does not apply, please enter N/A.
5. Contact DPAME for assistance/guidance at (800) 531-5800 ext 5, (210) 565-0656, or DSN 665-0656.



**NAME (Last, First, MI)** \_\_\_\_\_ **SSN** \_\_\_\_\_

20. POST-PGY1 EXPERIENCE (Last three (3) assignments)		
Duty Station	Duty Title	Dates
N/A		

21. Participation in Federally Funded Programs (check all that apply):  
 HPSP     ROTC/Ed delay     USUHS     FAP     Military Academy     Direct Accession

22. I possess a current, valid and unrestricted medical license  YES  NO (If yes, you must submit a copy of license including the expiration date with this application.)    N/A

**23. TRAINING PREFERENCES**

Rank order 1, 2, 3, etc.

AIR FORCE	ARMY
David Grant Medical Center, Travis AFB, CA	Eisenhower Army Medical Center, Fort Gordon, GA
Eglin Regional Hospital, Eglin AFB, FL	Madigan Army Medical Center, Tacoma, WA
Erhling Bergquist Hospital, Offutt AFB/University of Nebraska, NE	NCC-Walter Reed Army Medical Center, Washington, DC/ Dewitt Army Community Hospital, Fort Belvoir, VA/ National Naval Medical Center, Bethesda, MD, USUHS
Keesler Medical Center, Keesler AFB, MS	SAUSHEC-Brooke Army Medical Center, Fort Sam Houston, TX/ Wilford Hall Medical Center, Lackland AFB, TX / University of Texas, San Antonio, TX
NCC-/National Naval Medical Center, Bethesda, MD/Walter Reed Army Medical Center, Washington, DC/Dewitt Army Community Hospital, Fort Belvoir, VA, USUHS	
SAUSHEC-Wilford Hall Medical Center, Lackland AFB, TX/Brooke Army Medical Center, Fort Sam Houston, TX/University of Texas, San Antonio, TX	
Scott Medical Center, Scott AFB/St. Louis University, IL	Tripler Army Medical Center, Honolulu, HI
Wright-Patterson Medical Center, Wright Patterson AFB/Wright State Univ, OH.	William Beaumont Army Medical Center, El Paso, TX
USAFSAM, (RAM/HYPERBARIC ONLY) Brooks AFB, TX	Womack Army Medical Center, Fort Bragg, NC
Civilian Sponsored	Darnall Army Community Hospital, Fort Hood, TX
Civilian Deferred/Redeferred (Nonfunded)	Martin Army Community Hospital, Fort Benning, GA
	Keller Army Community Hospital, West Point, NY
<b>NAVY</b>	
Naval Medical Center, Portsmouth, VA	Civilian Sponsored
Naval Medical Center, San Diego, CA	Civilian Deferred (NGMEP)
Naval Hospital Bremerton, WA	<b>OTHER</b>
Naval Hospital, Camp Lejeune, NC	Uniformed Services University of the Health Sciences (Non-Clinical)
Naval Hospital, Camp Pendleton, CA	
Naval Hospital, Jacksonville, FL	Armed Forces Institute of Pathology
Naval Hospital, Pensacola, FL	Walter Reed Army Institute of Research
Naval Aerospace Medical Institute, Pensacola, FL	Other Federal (indicate Institution)
Civilian Navy Sponsored (FTOS)	
NCC-National Naval Medical Center, Bethesda, MD/Walter Reed Army Medical Center, Washington, DC/ Dewitt Army Community Hospital, Fort Belvoir, VA_Malcolm Grow Medical Center, Andrews AFB, MD/USUHS	
Civilian Deferred (NADDS)	

24. I understand that the GME training received is directed toward board certification. I am familiar with the training requirements for board certification in the specialty for which I have applied. It is understood that I must enter a program that is accredited and listed in good standing in the most current Graduate Medical Education Directory published by the American Medical Association or if applicable (generally PGY1 level of GME) by the most current Yearbook and Directory published by the American Osteopathic Association. I understand that I must also meet the requirements to sit for the certification examination by the respective specialty board which is recognized by the American Board of Medical Specialties. For those subspecialties, which do not lead to board certification nor accreditation status, training must be received in a program approved by the appropriate specialty society. I understand that my service obligation following schooling will be computed in accordance with applicable Service regulation and DoD Directives and that I will be made aware of my exact obligation prior to entering GME training. I acknowledge that I understand the contents of this application and I affirm that the information given in this application is true and complete to the best of my knowledge. I am aware that I must submit all supporting documents required by the military Service for which I am assigned for this application to be complete.

**APPLICANT SIGNATURE :** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Curriculum Vitae**  
MM/DD/YYYY

**PERSONAL DATA**

Full Name:  
SSN:

Corps:

Grade:  
Service:

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Current Home Address:

Home Phone:

Pager:

Cell Phone:

Email:

---

Medical School

Phone:

Commercial:  
Pager:

Ext:

Email:

---

Birth Date:  
State of Birth:

City of Birth:  
Country of Birth:

---

Spouse: (Complete the following only if your spouse is active duty)

Full Name: ,

SSN:

Service:

Duty Assignment:

Corps:

Other:

---

**EDUCATION:**

Undergraduate:

Medical School:

Other Postgraduate:

Degree:

School:

Graduation Date:

Degree:  
School:  
Graduation Date:

Degree:  
School:  
Graduation Date:

Military Training Courses:

OBC OAC CGSC C4 C4-A Flight Surgeon Brigade Surgeon Course

Other Military Courses

**PRIOR MILITARY SERVICE** (Complete this section if you have had prior active duty military service, to include a staff physician assignment within another branch of service or prior service before attending medical school, – chronological order starting with latest Service)

Type of Service:  
Rank:  
Corps (commissioned Service only):  
Description of Service (describe the type of duties performed):

Dates of Service: TO  
.....

Type of Service:  
Rank:  
Corps (commissioned Service only):  
Description of Service (describe the type of duties performed):

Dates of Service: TO  
.....

Type of Service:  
Rank:  
Corps (commissioned Service only):  
Description of Service (describe the type of duties performed):

Dates of Service: TO  
.....

**WORK HISTORY/MILITARY ASSIGNMENT HISTORY (If applicable)** (Chronological order starting with current assignment or civilian job going back no more than 5 years before the start of medical school):

Duty Title:  
Duty Location:

Dates of Assignment: TO Present

.....  
Civilian positions:  
Employer:  
Duties:  
Dates of Employment:

---

**HONORS AND RECOGNITION:**

Undergraduate:  
Medical:  
Military:

---

**PROFESSIONAL SOCIETIES:** (must indicate in what capacity completed i.e. medical student)

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**PUBLICATIONS/RESEARCH:** (must indicate in what capacity completed i.e., medical student)

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**EXTRACURRICULAR ACTIVITIES/VOLUNTEER WORK** (Only cover 5 years before the start of medical school)

Position:  
Employer:  
Duties:  
Dates of Employment

# 2nd Choice Form

This form is required by all applicants, whether or not an applicant has a second choice for specialty (Example: First specialty choice is Internal Medicine, Second specialty choice is Family Medicine). If an applicant has only one choice for specialty but wishes to list more than one placement preference, list this information on the second page of the 2-page JSGMESB application.

(CHECK ONE)

1. \_\_\_\_\_ **I do have** a second choice for specialty/subspecialty training. (Complete items 2-5.)

\_\_\_\_\_ **I do not have** a second choice for specialty/subspecialty training. (Do not complete sections 2-5. Sign/date bottom of page)

2. If I am not selected for my first choice, I wish to be considered for the following as my **second** choice preference. I have ranked my preference for training location for my **second** choice below. (**Only** applicable if I am **NOT** selected for my first choice).

3. **2D CHOICE TRAINING REQUESTED**

Specialty \_\_\_\_\_

Program Length \_\_\_\_\_ years                      Start Date \_\_\_\_\_

4. **TRAINING PREFERENCES:-** (Please rank order preference desired, with “1” being your first choice).

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> David Grant       | <input type="checkbox"/> NCC (DeWitt, Bethesda, Walter Reed, USUHS) | <input type="checkbox"/> Wright Patterson |
| <input type="checkbox"/> Eglin             | <input type="checkbox"/> SAUSHEC                                    | <input type="checkbox"/> Keesler          |
| <input type="checkbox"/> Ehrling Bergquist | <input type="checkbox"/> Scott                                      | <input type="checkbox"/> Navy             |
| <input type="checkbox"/> Deferred          | <input type="checkbox"/> Civilian Sponsored                         | <input type="checkbox"/> Army             |

Please print:

\_\_\_\_\_ (LAST, FIRST, MI)                      (SSAN)                      (DATE)

**SIGNATURE** \_\_\_\_\_

# 2nd Choice Form

# PGY1 ONLY

If I am not selected for either my first or second categorical choice:

1. I do \_\_\_\_ wish to be considered for PG1 training at an active duty location. (Complete the following)
2. I do not \_\_\_\_ wish to be considered for PG1 training at an active duty location. (Sign/date bottom of page unless you are applying for a pre-select specialty such as Radiology, Neurology or Anesthesiology)

### PG1 ACTIVE DUTY LOCATION PREFERENCES

(Rank specialties (1, 2, 3) and then rank locations associated with specialty)

_____ TRANSITIONAL	_____ INTERNAL MEDICINE	_____ GENERAL SURGERY
____ David Grant	____ SAUSHEC	____ Wright-Patterson
____ SAUSHEC		____ Keesler
		____ David Grant
		____ SAUSHEC

3. I have applied for a specialty that requires a PG1 year in an active duty program and would like my preliminary year to be in (Rank choices numerically, i.e., 1,2,3, as appropriate):

_____ TRANSITIONAL	_____ INTERNAL MEDICINE	_____ GENERAL SURGERY
--------------------	-------------------------	-----------------------

**The preliminary year will be at the same location as your specialty training.**

4. APPLICANT COMMENTS/REMARKS: (If applicable)

---

(LAST, FIRST, MI)	(SSAN)	(DATE)
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**SIGNATURE:** \_\_\_\_\_

# Graduate Medical Education - Statement of Understanding

## FOR MEDICAL STUDENTS ONLY

NAME (PRINT) \_\_\_\_\_

- a. I must have taken, passed and obtained the results of Step I and Step 2 of the USMLE/NBOME/COMLEX prior to meeting the Joint Services Graduate Medical Education Selection Board (JSGMESB).
- b. I must apply for one year of training or for a categorical program in a basic specialty in active duty status or in deferred status.
- c. If I am selected in a categorical training program in an Air Force medical facility, I will not be required to apply for continued training in the same training program. I further understand that if I am selected for an active duty program, I will withdraw from the National Residency Match Program. I must possess a current, valid, unrestricted and unencumbered state medical license before completion of my 2<sup>nd</sup> post graduate year
- d. If I am selected for full deferral to complete specialty training in a basic specialty, I will be deferred for the minimum period necessary to complete eligibility for board certification. Additional deferment or change to another specialty will require an application to a future JSGME Selection Board for consideration. I must possess a current, valid, unrestricted and unencumbered state medical license before completion of my 2<sup>nd</sup> post graduate year.
- e. If I am not selected for a full categorical program, I will be given one year of clinical post-graduate training only in internal medicine, general surgery, or transitional medicine. If I do not apply for further training, or am not selected for further training, I will be released to Physician Utilization Branch for an assignment as a General Medical Officer or a Flight Surgeon. I understand that I must take STEP 3 and provide DPAME a passing score by 30 Mar 2009.
- f. I understand that beginning with the 2003 JSGMESB, all physicians will be required to work in a clinical capacity for a short tour (12 months) or a two-year stateside assignment after completion of initial training, unless the AF/SG waives this requirement due to the needs of the AF mission.
- g. In the event I am deferred for training I will only enter and accept training through the NRMP as approved by the JSGMESB.
- h. I understand that in accordance with the Department of Defense Policy and AFI 44-102 applicants are not authorized for off-duty employment, i.e. "moonlighting," during the GME training.
- i. I understand that once I have entered training as approved by the JSGMESB, I will be unable to change training locations or specialty training without Air Force approval. I will contact HQ AFPC/DPAME in the event circumstances (personal or academic) changes occur.
- j. I understand that I must contact DPAME in the event I am placed on academic notice or probation or my completion date changes from the selection board approval date.

\_\_\_\_\_  
(SIGNATURE)

\_\_\_\_\_  
(SSAN)

\_\_\_\_\_  
(DATE)

# 2007 Graduate Medical Education – Weight Statement

Must be completed by all applicants

**MUST WEIGH BETWEEN 2 – 5 OCT 2007  
AND SUBMITTED TO AFPC/DPAME NLT 12 OCT 2007**

This information is **NOT** self-reporting. The statement must be signed and dated by a medical representative at your training facility, your personal physician or **OTHER** medical personnel **OTHER THAN YOURSELF**. Your application will **NOT** be completed without this certification.

PRINTED NAME

SSAN

HEIGHT (INCHES)

WEIGHT

INFORMATION CERTIFIED BY

NAME

TITLE, WORK PHONE #

**SIGNATURE of Medical Representative and current date**

**Date** \_\_\_\_\_.

**If you are over your maximum allowable weight a body fat percentage is required. Body Fat%** \_\_\_\_\_.

**RACE/ETHNIC VOLUNTARY DISCLOSURE STATEMENT**

**NAME** \_\_\_\_\_

Indicate your sex and circle one choice in the race category as well as one choice in the ethnic category. This information is used for statistical analysis only.

GENDER: \_\_\_\_\_ **MALE** \_\_\_\_\_ **FEMALE**

Race, (Circle applicable code, or list other at the bottom of the list)	Code
ASIAN, BLACK/AFR AM, NAT HI/PACIFIC ISL, WHITE	1
ASIAN, BLACK/AFR AM, WHITE	2
ASIAN, NATIVE HI/PACIFIC ISL	3
ASIAN, NATI HI/PACIFIC ISL, WHITE	4
ASIAN, WHITE	5
BLACK, AFR AM, NAT HI/PACIFIC ISL	6
BLACK, AFR AM, NAT HI/PACIFIC ISL, WHITE	7
BLACK, AFR AM, WHITE	8
NAT HI/PACIFIC ISL, WHITE	9
AMERICAN INDICAN/ALASKA NATIVE	A
ASIAN	B
BLACK./AFRICAN AMERICAN	C
NATIVE HAWAIIAN/OTHER PACIFIC ISLANDER	D
WHITE	E
DECLINED TO RESPOND	F
IDENTIFICATION PENDING	G
AMER INDIAN/AK NAT, ASIAN	H
AM INDIAN/AK NAT, ASIAN, BLACK/AFR AM	J
AM INDIAN/AK NAT, ASIAN, BLACK/NAT HI/PACIFIC ISL	K
AM IND/AK NAT,ASIAN,BLACK/ HI/PACIFIC ISL/WHITE	L
AM INDIAN/AK NAT,ASIAN,BLACK/AFR AM,WHITE	M
AM INDIAN/AK NAT,ASIAN,NAT HI/PACIFIC ISL	N
AM INDIAN/AK NAT,ASIAN,NAT HI/PACIFIC ISL,WHITE	P
AM INDIAN/AK NAT,ASIAN,WHITE	R
AM INDIAN.AK NAT/BLK/AFR AM/NAT HI/PACIFIC ISL	S
AM INDIAN/AK NAT,BLACK/AFR AM, WHITE	U
AM INDIAN/AK NAT, NAT HI/PACIFIC ISL	A
AM INDIAN/AK NAGT/NAT HI/PACIFIC ISL, WHITE	W
AMERICAN INDIAN/ALASKA NATIVE,WHITE	X
ASIAN, BLACK/AFRICAN AMERICAN	Y
ASIAN BLACK/AFR AM, NAT HI/PACIFIC ISL	Z
<b>OTHER</b> _____	

**PRIVACY ACT STATEMENT:** AUTHORITY: Title 10, U.S.C., Section 8013, Secretary of the Air Force.  
**PURPOSE:** to provide Department of Defense statistical analysis of the results of the GME selection board.  
**ROUTINE USES:** It will be used by HQ AFPC/DPAME for statistical analysis only. **DISCLOSURE:**  
 Furnishing this information is voluntary, however, without it, accurate statistical analysis of the GME selection board cannot be accomplished.

<b>2007 DOD APPLICATION EDUCATION SUMMARY – MEDICAL STUDENT</b>		
NAME	GRADE	SSAN

<b>UNDERGRADUATE</b>	<b>MEDICAL SCHOOL</b>
<input type="checkbox"/> USAFA Dates sponsored (MM/YR)	<input type="checkbox"/> USUHS Dates sponsored (MM/YR)
<input type="checkbox"/> AFROTC Dates sponsored (MM/YR)	<input type="checkbox"/> HPSP Dates sponsored (MM/YR)
<input type="checkbox"/> Civilian	<input type="checkbox"/> Civilian
	<input type="checkbox"/> AFROTC Educational Delay Dates MM/YR
<b>Name of educational institution</b>	<b>Name of Civilian Medical School</b>

**OFFICER’S TRAINING COURSE** (list attendance at COT, BOT, OTS, HPOIC, ROTC, USAFA, or None Attended)

Training	Training Location	Start/Stop Dates (MM/YR)

**SECURITY CLEARANCE**

Security clearance <input type="checkbox"/> yes    Expiration date _____ <input type="checkbox"/> no    Date initiated _____

**ACTIVE DUTY TOURS**

Assignment	Position Title	Base/Location	Dates (To/From) (MM/YR)