

INSTRUCTIONS FOR SUBMITTING AN APPLICATION FOR APPOINTMENT AS A COMMISSIONED OFFICER IN  
THE  
U.S. PUBLIC HEALTH SERVICE COMMISSIONED CORPS

**U.S. Public Health Service Commissioning Application Packet Checklist**

**YOUR APPLICATION PACKET MUST INCLUDE:**

- PHS 50 Application for Appointment as a Commissioned Officer in the U.S. Public Health Service Commissioned Corps (This is a web form that is accessible after registering for an account in the Applicant Enrollment System)
- PHS-50 MUST include all jobs and periods of unemployment from the date you received your qualifying degree
  - PHS-50 MUST include all post-secondary schools attended (even if no degree was conferred)
- PHS 1813 Reference Request for Applicants to the U.S. Public Health Service Commissioned Corps
- At least three (3) reference forms **MUST** be uploaded to the Applicant Enrollment System
  - At least one (1) reference MUST be from a current or most recent supervisor within the past two (2) years
- Personal Statement
- One (1) Personal Statement MUST be uploaded and submitted via the Applicant Enrollment System
  - Statement MUST be provided on the Personal Statement form and cannot exceed **one (1)** page
    - Do **NOT** submit additional pages
  - Upload signed and dated Personal Statement in ink (Digital Signature allowed)
- Original transcripts from **ALL** post-secondary academic institutions attended
- You may upload copies of official/unofficial transcripts to the Applicant Enrollment System
  - Uploaded copies of official transcripts does NOT replace the requirement for electronic delivery or mailing of sealed official transcripts from the academic institution
  - You will be notified when to electronically request or mail in the official sealed transcripts, please do not request **official** transcripts until you receive notification from the Call to Active Duty Team
- Current CV/résumé
- Upload a copy of your current CV/résumé to the Applicant Enrollment System
  - CV/résumé professional experience and work history MUST date back to when you received your "qualifying degree" (the degree in your category which qualifies you for a commission). The dates worked **MUST** be in month/year format in **reverse chronological order** and you **MUST** include the average hours per week at each place of employment (**Listing PRN is NOT acceptable**). You **MUST** specify all the time periods for which you were unemployed (even if it was as short as one month).
  - You MUST provide the full address for all work experience
  - You MUST include duties performed at each place of employment and the work history on your CV must mirror the work history entered on the electronic PHS-50.
- Professional licenses if applicable
- Upload ALL professional licenses (Active and Expired) and/or board certifications (if licensed/board certified as applicable)
  - For disciplines (i.e. Medical, Dental, etc.) that require residency or other professional training programs, please upload and include documentation for such activities
  - For NURSES, upload a copy of NCLEX results showing you passed. This **MUST** be submitted in addition to the required license documents.  
(<https://www.ncsbn.org/1225.htm>)
- Naturalization Certificate (or other certified proof of U.S. Citizenship)
- Upload to the Applicant Enrollment System only if you were **NOT** born a United States citizen/**NOT** born in the United States
  - If you became a citizen under your parents as a minor and did not receive a naturalization number, submit your passport as proof of citizenship AND provide your parents certificate information in item #5 on the PHS-50.

- OF 306 Declaration for Federal Employment
  - Upload to the Applicant Enrollment System
  - Sign as an applicant (sign as appointee only if you are a CURRENTLY a federal employee and then fill out additional section)

- Applicant Identity Documents
  - Upload one document from Column A, **AND** one from Column B, **AND** one from Column C using examples noted from the Applicant Identity Guide Resource

- Tattoo/Body Art/Brand/Piercing/Dental Ornamentation (Cover Sheet) excluding permanent retainers (if applicable)
  - Adhere to all instructions (including the submission of photos) if waiver was requested

- Signed Statement of Understanding
  - Upload Statement of Understanding to the Applicant Enrollment System

- Application Checklist - signed and dated.
  - Upload this signed and dated checklist to the Applicant Enrollment System

**FOR APPLICANTS CURRENTLY SERVING OR HAVE PREVIOUSLY SERVED IN A UNIFORMED SERVICE OTHER THAN THE U.S. PUBLIC HEALTH SERVICE:**

**Applicants Currently in the Reserves (includes Retired Reservists) and/or Discharged from a Uniformed Service (If not previously submitted upload the following):**

- The last **five (5)** officer or enlisted evaluations
- Copy of all DD 214s (**Member-4 Copy REQUIRED**) and/or all NGB 22s
- Request a PHS 6134 Statement of Service from your respective service
  - PHS 6134 Statement of Service **MUST** be authenticated by someone other than yourself who is authorized to access your service records and can interpret them properly
- Copy of all point sheets for current and/or prior service
- Oath or other Appointment Documents **and** any Call to Active Duty Orders
- DD 368 Request for Conditional Release **OR** Proof of Discharge
  - If your DD-214 indicates transfer into any component in block 9, you **MUST** provide this, whether your Reserve Obligation Term Date has passed or not. A Reserve Obligation Term Date is **NOT** a guarantee of discharge.
  - Discharge Orders
  - Discharge Certificate
- Official documentation that includes:
  - Full name, social security number and home of record
  - Current grade and date of promotion or appointment in current grade
  - Current duty assignment, duty station, branch (Medical, etc.)
  - Promotion history report/records
  - Copies of last 5 Officer Efficiency Report or Enlisted Efficiency report
  - Copies of disciplinary record and derogatory information
  - Report of security clearance held by officer

**Applicants Currently on Active Duty**  
**(If not previously submitted upload the following):**

- The last **five (5)** officer or enlisted evaluations
- Copy of all DD 214s (**Member-4 Copy REQUIRED**) and/or all NGB 22s (The Current Tour DD-214 **MUST** be submitted once available after USPHS Call to Duty effective date)
- Request a PHS 6134 Statement of Service from your respective service
  - PHS 6134 Statement of Service **MUST** be authenticated by someone other than yourself who is authorized to access your service records and can interpret them properly
- Copy of all point sheets for current and/or prior service (if applicable)
- Oath or other Appointment Documents **and** any Call to Active Duty Orders
- Copy of Request for Inter-Service Transfer to the U.S. Public Health Service Commissioned Corps.
  - [https://www.esd.whs.mil/Portals/54/Documents/DD/issuances/dodi/130004\\_dodi\\_2017.pdf](https://www.esd.whs.mil/Portals/54/Documents/DD/issuances/dodi/130004_dodi_2017.pdf) (DoD policy)
  - [https://dcp.psc.gov/ccmis/ccis/documents/CCPM23\\_3\\_5.pdf](https://dcp.psc.gov/ccmis/ccis/documents/CCPM23_3_5.pdf) (PHS policy)
  - **MUST** submit signed and dated Inter-Service Transfer statement of understanding (page 15 of PHS Inter-Service Transfer policy – Appendix D)
  - Final approval of Inter-Service Transfer **MUST** be received before orders for U.S. Public Health Service can be issued
  - Statement indicating intent to separate from active duty prior to obtaining a commission in the U.S Public Health Service

**OR**

- Separation Orders
  - For Current Active Duty Enlisted **or** Active Duty Officers not qualified for Inter-Service Transfer
  - Separation Order **MUST NOT** indicate transfer into the Reserve Component
- Official documentation that includes:
  - Full name, social security number and home of record
  - Current grade and date of promotion or appointment in current grade
  - Current duty assignment, duty station, branch (Medical, etc.)
  - Promotion history report/records
  - Copies of disciplinary record and derogatory information if applicable
  - Report of security clearance held by officer

You are required to upload all application materials within 30 days from the initiation of your application or it will be closed.

**\*\*Note: Application Documents will be verified for authenticity at random\*\***

I, the undersigned, understand that if the aforementioned materials are not included in one complete application for commissioning that my application will be closed.

**Please ensure your application is COMPLETE. Incomplete applications will be CLOSED.**

Type Name and Sign	Date
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**Verification of identity is a requirement of the application. Please provide a copy of one document from List A, List B and List C below.**

<b><i>List A Documents</i></b>	<b><i>List B Documents</i></b>	<b><i>List C Documents</i></b>
U.S. Passport or U.S. Passport Card	Driver's license or identification (ID) card issued by a state off the United States, provided it contains a photograph or information such as name, date of birth, gender, height, eye color and address.	U.S. Social Security account number card that is unrestricted. A card that includes any of the following restrictive wording is not acceptable: <ul style="list-style-type: none"> <li>○ Not Valid for Employment</li> <li>○ Valid for Work Only with INS Authorization</li> <li>○ Valid for Work Only with DHS Authorization</li> </ul>
Original or certified copy of a birth certificate issued by a state, county, municipal authority or outlying possession of the United States bearing an official seal	U.S. Military card	
Certificate of Birth Abroad issued by the U.S. Department of State (Form FS-545)		
Certification of Report of Birth issued by the U.S. Department of State (Form DS-1350)		
Permanent Resident Card or Alien Registration Receipt Card (Form I-551)		