

**OFFICER'S STATEMENT  
for 2013 Promotion Board Review**

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PHS SERIAL NUMBER

**SECTION I -- Officer Information: enter your PHS serial number in boxes in upper right corner and enter name and category below.**

Officer Name

Professional Category (e.g., Medical, Nurse, Health Services, Pharmacy, etc.)

**SECTION II -- Address the following three points in bullet format in the space provided (*any additional sheets will be discarded*).**

1. Your support of PHS Commissioned Corps activities.
2. Your commitment to visibility as an officer (including frequency and occasion of wearing the uniform).
3. Your vision and expectations of a career in the PHS Commissioned Corps, including commitment to the USPHS mission.

1. Support of PHS Commissioned Corps activities.

**SECTION III -- Signature**

Signature & Date:

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