

DEPARTMENT OF HEALTH AND HUMAN SERVICES
 PUBLIC HEALTH SERVICE COMMISSIONED CORPS
 DIVISION OF COMMISSIONED PERSONNEL

ORDER PURSUANT TO BASIC TRAINING CONTRACT

DATE _____

TO:

ORDER NO.	TO	CONTRACT NO.
APPROPRIATION SYMBOL		OBJECT CLASS
OBLIGATION NUMBER		ESTIMATED COST

Part 1 This will certify that _____ is to be enrolled at your institution, subject to your acceptance of him/her as a student, in accordance with the contract cited in the upper right corner of this order for the following course of instruction: _____ beginning 8/1/ and ending 7/31/.

Part 2 It is requested that after this student is enrolled, you execute Part 4 of this order. Retain 1 photocopy, and return the original and 4 photocopies as soon as practicable to the undersigned.

Part 3 The terms and conditions of the contract cited in the upper right corner of this order shall govern.

 (SIGNATURE OF AUTHORIZING OFFICIAL)

 (NAME AND TITLE—PLEASE TYPE)

FUNDS ARE AVAILABLE. INVOICES WILL BE FORWARDED BY THE CONTRACTING OFFICE TO THE AGENCY FINANCE OFFICE.

ADDRESS TO WHICH THIS ORDER IS TO BE RETURNED

Part 4 TO: Contracting Officer
PSC/OS/DAM/General Acquisitions Branch
Parklawn Building, Room 5-101
5600 Fishers Lane
Rockville, MD 20857-0001

 (Date of enrollment)

The student named above has been enrolled at this institution for the course of instruction listed in Part 1 of this order (Note *exception* below.)

The curriculum to be pursued by this student, and the itemized charges due or to become due on account of such enrollment for each semester or other period of instruction, are as follows:

It is certified that these charges are not greater than those charged for other students pursuing the same or similar curriculum.

 (NAME OF INSTITUTION)

 (SIGNATURE)

 (CITY-STATE-ZIP CODE)

 (TYPE NAME AND TITLE)