

Department of Medical and Clinical Psychology
(301) 295-3270, Fax (301) 295-3034

GRADUATE APPLICATION ADDENDUM FOR CLINICAL PSYCHOLOGY DOCTORAL PROGRAM

NAME _____
Last First Initial

1. **Military Status and Background.** The Department of Defense Policy, in coordination with the Graduate School at the Uniformed Services University of the Health Sciences, may not authorize the processing of applications of individuals affiliated with or obligated to the Uniformed Services without a Letter of Approval to apply from their respective components. To ascertain whether you need such an approval, please respond to questions 1a, b, c, and 2 below. Please answer these questions even if you have no pending obligations or no prior or current military affiliation. We cannot make an offer of admission without service specific approval; therefore, please take immediate action to obtain said approval. Each military department has established regulations governing the procedures for initiating and processing requests for approval. If you need advice on how to request approval, consult the Clinical Psychology Specialty Consultant for your service or your local Personnel Office. (Note: If an individual is not connected with the a military service, this shall not be prejudicial to his or her chance for admission to USUHS. Applicants with or without military experience compete on an equal basis for class spaces for the Clinical Psychology Ph.D. Program in the Department of Medical and Clinical Psychology.)

a. Have you ever served or are you currently serving on active duty (do not count time spent as a cadet or midshipman, or period of "active duty for training" in connection with Reserve or National affiliation)? ____ Yes ____ No
(If Yes, complete the applicable items below.)

Active Duty _____ to _____
Entry Date (mo, day, & yr) Date of Discharge or Separation (mo, day, & yr)

Component _____ Current or Highest Rank Held _____
(Army, Navy, Air Force, Marines, etc.)

Military Specialty _____
(Applicable Only to Enlisted Personnel)

Branch of Service _____
(Applicable Only to Officer Personnel)

If currently on active duty, indicate the unit in which you are now serving, your position (title) within the unit, and the mailing address and telephone number of that unit.

b. Have you ever served or are you currently serving in the Reserves or National Guard? ____ Yes ____ No

Date of Service: From _____ to _____
Entry Date (mo, day, & yr) Date of Discharge or Separation (mo, day, & yr)

Component _____ Current or Highest Rank Held _____
(Army, Navy, etc.)

Military Specialty _____
(Applicable Only to Enlisted Personnel)

Branch of Service _____
(Applicable Only to Officer Personnel)

If currently in the Reserves or National Guard, indicate the unit that you are now serving, its mailing address and your position (or title) in the unit.

c. List any awards, decorations, or special honors you have received as a result of active duty or Reserve/National Guard.

- d. Briefly describe the types of active duty or Reserves component assignments you have had and any special military schooling you have completed. _____

2. Service Obligation:

Are you currently obligated for active duty in the Uniformed Services for any of the following reasons?

- a. Scholarship ROTC (if Yes, complete item [1] below) _____ Yes _____ No
 b. Nonscholarship Advanced ROTC? [if Yes, complete item (1) below] _____ Yes _____ No
 c. Attendance at a Service Academy ?[If Yes, complete item (2) below] _____ Yes _____ No
 d. Any other Government-sponsored schooling? _____ Yes _____ No
 (1) ROTC Component _____ Army _____ Navy _____ Air Force _____ Marines

ROTC Unit _____
 (School, Unit Designation, and ROTC Region)

(Indicate even if you did not complete ROTC Program)
 Date you were, or expect to be commissioned (mo, day, & yr) _____

(2) Service Academy attended _____
 (Indicate even if you did not complete ROTC Program)
 Date you were, or expect to be commissioned (mo, day, & yr) _____

Note: If you did not complete the ROTC Program or the Service Academy, please attach the explanation to this form.

3. Physical and Security Requirements. All persons accepted to the Graduate School at the Uniformed Services University of the Health Sciences Clinical Ph.D. Track must meet the physical and security requirements for commissioning in the Uniformed Services; otherwise, they are ineligible to matriculate. Physical examinations are given by the Services in coordination with the Clinical Psychology Specialty Consultants to the Surgeons General or their representatives. The Graduate School assumes no liability for expenses incurred by applicants who so not qualify medically are not for entrance. A security investigation of all entrants to the Graduate School is to ensure that their acceptance into the Uniformed Services of the United States is not detrimental to the interests of the national security. Individuals who fail to meet suitability standards will not be eligible for admission.

- a. To the best of my knowledge, I am qualified for commissioning _____ Yes _____ Uncertain _____ No
 (If you answered Uncertain, explain why in the spaces below, and give completed details regarding the potentially disqualifying condition.)

4. **Application Status:** Have you ever applied to the Clinical Psychology Ph.D. Program at USUHS? ___ Yes ___ No
 If Yes, please indicate what year (s) and indicate if you had an interview.

5. **Please provide the following scores:** GREs _____ Verbal _____ Quantitative; Undergraduate G.P.A. _____
 (Junior & Senior Year Only)

6. **[Civilians Only]** My preferences for military service is/are:

<i>SERVICES</i>	PREFER	WOULD ACCEPT	DO NOT WANT
ARMY			
NAVY			
AIR FORCE			

7. **I certify that all information reported herein is correct.**

 Signature Date

 (Please Print Name)