

DEPARTMENT OF THE NAVY

FULL COMMAND NAME 1234 STREET NAME ROAD CITY, STATE xxxxx-xxxx

IN REPLY REFER TO: $1000 \\ 00$

From: Commanding Officer, Full Command Name

To: HMC(DEVICES) First M. Last, USN

Subj: APPOINTMENT AS COMMAND PROGRAM MANAGER FOR THE HOSPITAL

CORPSMAN PERSONNEL QUALIFICATION STANDARDS PROGRAM

Ref: (a) BUMEDINST 1510.27

(b) NML&PDC HM/BDA PQS Guidebook

1. You are appointed as the Program Manager for the Hospital Corpsman Personnel Qualification Standards program, effective immediately. You will be guided by references (a) and (b) in the performance of your duties.

I. M. COMMANDING

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Member