Date

From: [Rank, Name, Service, Corps of applicant]

To: Commanding Officer, Naval Medical Leader and Professional Development Command, Graduate Dental Programs, Code 1WPGDC, 8955 Wood Road, Bethesda, MD

 20889-5628

Via: Commanding Officer, [Activity Title] or Dean, (Name of Dental School)

Subj: ACADEMIC YEAR 2026 NAVY DENTAL CORPS ADVANCED DENTAL

 EDUCATION

Ref: (a) BUMEDNOTE 1520 of

 (b) DoD Instruction 6000.13 of 30 December 2015

Encl: (1) Statement of Motivation

1. Per references (a) and (b), I request to be considered for assignment to residency training in (discipline), commencing in academic year 2026. I request to be considered for (insert specific program or programs you are applying): Primarily in-Service (FTIS), but will accept out-Service (FTOS) training; Primarily out-Service (FTOS), but will accept in-Service (FTIS) training; or considered equally for FTIS and FTOS.

2. Enclosure (1) is provided for consideration. Other application requirements have been submitted or requested as required. I have arranged for an interview with the appropriate specialty leader as directed.

3. If this request for residency training is approved, and I am assigned to such training, I agree not to resign during the residency and to serve in the Navy for my service obligation plus any previously unfulfilled service obligation after completion of the residency course. I understand my service obligation for the requested primary residency to be[\_\_]-years service obligation per enclosure (4) of reference (a). This will be served in conjunction with any unfulfilled service obligation existing prior to the start of the residency program. I understand that this period of service obligation is in addition to that for which I may be previously and otherwise obligated and it may or may not be performed concurrently (reference (b).

PRIVACY ACT STATEMENT

Data Required by the Privacy Act of 1974

Authority: Sections 2005 and 2013 of Title 10, U.S. Code

Principal Purpose: To evaluate applicant’s qualifications for selection to participate in

Naval Postgraduate Dental Education.

Enclosure (2)

 BUMEDNOTE 1520

 4 Apr 2025

Subj: ACADEMIC YEAR 2026 NAVY DENTAL CORPS ADVANCED DENTAL

 EDUCATION

Routine Uses: To assist officials and employees of the Department of the Navy in determining your eligibility for and approving or disapproving the education program being requested by the Department of Defense or Navy.

Disclosure: Disclosure is voluntary; however, failure to provide requested information may result in non-selection.

4. I understand the Privacy Act of 1974 (P.L. 93-579) became effected on 27 September 1975 and is applicable to personal data records maintained on U.S. citizens and foreign nationals admitted for permanent residence. My signature acknowledges that I am familiar with the statements contained herein and authorize use of information provided for the purposes listed in the Privacy Act Statement notification in reference (a).

 Signature

 Printed Name