DEPARTMENTS OF THE ARMY AND THE AIR FORCE
NATIONAL GUARD BUREAU
111 SOUTH GEORGE MASON DRIVE
ARLINGTON, VA 22204-1382

NGB-ART 24 July 2003

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Interservice Physician Assistant Program (IPAP) Application Procedures

1. This memorandum supersedes all prior IPAP training memoranda.

2. Reference: AR 601-20, The Interservice Physician Assistant Program (basic prerequisites and course information only - see below for ARNG application procedures).

3. Please give this memorandum appropriate circulation to ensure all eligible soldiers are aware of the opportunity and requirements to apply for the IPAP.

4. The IPAP selection process begins with interested applicants having all of their college/university transcripts evaluated by the affiliate university. This is accomplished by the State AMEDD Recruiter/Technician collecting all official transcripts from every college/university attended on each applicant - including Army Ace Registry Transcript System (AARTS) transcripts and then forwarding them all to the address listed below for evaluation. NOTE: Once an evaluation has been completed and approved by the affiliate university, no further evaluations are necessary unless changes in course academics or recently posted grades require another evaluation.

ARNG Readiness Center
ATTN: NGB-ART-I (CW4 Doug White)
111 S. George Mason Drive
Arlington, VA 22204-1382

5. Once an approved evaluation is obtained, an application packet will be assembled and also sent by the State AMEDD Recruiter/Technician to the same address as indicated above.

6. Enclosure 1 outlines the prerequisites, experience, basic education requirements and application packet assembly instructions. Enclosure 2 is the application packet checklist. Enclosure 3 provides the format for the application memorandum.

Two formats provided: Enlisted/WO applicants and the other for Officers (as appropriate). Packets must contain the information as described in these enclosures and be processed through the AMEDD Recruiter and State Training Office before being forwarded.

7. The next four tentative IPAP Selection Board dates and NGB suspense's are as follows:

TRANSCRIPT(S) SUSPENSE	PACKET SUSPENSE	IPAP BOARD DATES	CLASS DATES	CLASS NUMBER
18 JUL 03	15 AUG 03	06 - 08 OCT 03	25APR04-22APR06	04-002
07 NOV 03	12 DEC 03	12 - 14 JAN 04	22AUG04-19AUG06	04-003
12 MAR 04	16 APR 04	10 - 12 MAY 04	??JAN05-??JAN07	05-XXX
16 JUL 04	20 AUG 04	13 - 15 SEP 04	??MAY05-??MAY05	05-XXX

8. Prior to submission of an application packet, the state will subject each applicant to a screening process to ensure Federal Recognition eligibility and appointment into a MTOE/TDA assignment upon course completion. A memorandum signed by the State Personnel Officer will be placed in the applicant's packet under the appropriate tab indicating the applicant was screened and is eligible to be commissioned upon completion of the course. A statement similar to the following should be included in the memorandum.

"This memorandum is written to certify that, if selected, SSG Pat D. Applicant is eligible for appointment as a Second Lieutenant in the Army Medical Specialist Corps (SP)as a 65D, Physician Assistant upon completion of the IPAP, Interservice Physician Assistant Program. He/she meets all requirements to make application for this program, as well as meeting the administrative prerequisites for appointment upon completion of the school IAW all applicable regulations and references." (NGB-ART memo, AR 135-100, AR 135-101, and NGR 600-100)."

Note: Selectees will be processed by a convening Federal Recognition Board prior to leaving home station for attendance at the IPAP.

9. The IPAP is a two-year, two-phased course. Upon successful completion of Phase 2 training (clinical phase), eligible enlisted and warrant officer students will be commissioned as Second Lieutenants in the Army Medical Specialist Corps (SP).

Eligible Commissioned Officers will be conditionally re-appointed to the SP Corps (Primary AOC 00E65) immediately prior to the start of their class. Date of rank for re-appointment will be the first day of the time period on PCS ADT orders to IPAP or no earlier than 30 days prior to the scheduled start date of course. **IAW AR 135-91, Table 2-1, ARNG graduates of the IPAP course incur a 6-year ARNG military service obligation.**

10. Funding for the IPAP is reimbursed to the State Schools Program Account. Reimbursement is issued to the state at the end of the first month in which the student is enrolled and will cover the entire period of duty which occurs in that fiscal year. Subsequent reimbursements occur at the start of the new fiscal year.

11. Individuals selected for the IPAP will be assigned against an additional TDA position. Lack of a current slot should not be a restricting factor in attracting qualified applicants to this critical wartime shortage specialty, unless the state and/or nation is significantly overstrength in that AOC. However, states currently at or above 100% fill for 65Ds will enclose a memorandum signed by the applicant and the applicant's MILPO indicating that, upon graduation, if there are no vacancies in their state the individual will participate in the national cross-leveling program, ATTAIN.

12. Further information on IPAP is available at the following website: http://www.cs.amedd.army.mil/ipap/.

13. The point of contact is CW4 Doug White, DSN 327-7306 or 703-607-7306, or e-mail at doug.white@ngb.army.mil.

FOR THE CHIEF, NATIONAL GUARD BUREAU:

3 Encls
as

ROOSEVELT BARFIELD
COL, NGB
Chief, Training Division

DISTRIBUTION:
Ea. State AMEDD Recruiter/AMEDD Tech
(CONT)

INTERSERVICE PHYSICIAN ASSISTANT

1. PREREQUISITES:

a. Must be a member of the Army National Guard with at least one year of service with the Army National Guard. Officer applicants are limited to company grade or lower (2LT - CPT) who will have 12 years or less total commissioned service when their class starts.

b. Projected to fill a valid PA vacancy upon completion of the program.

c. Not older than 48 years of age at the time of commission - approved age waiver necessary prior to board review for any applicant over the age of 33.

d. A general technical (GT) score of 110 or higher.

e. Upon acceptance into the IPA training program, soldiers will be required to extend their current enlistment for a period to expire not less the projected completion date of the training program. Also, IAW AR 135-91, Table 2-1, graduates incur a 6 year military service obligation.

f. Meet all of the eligibility criteria for appointment as a commissioned officer IAW AR 135-100, AR 135-101, and NGR 600-100.

2. DESIRED EXPERIENCE:

a. 36 months experience in the 91 Career Management Field (CMF), or any other medical Military Occupational Specialty (MOS).

b. At least 24 months experience in a civilian medically oriented position.

c. All soldiers who otherwise meet the basic eligibility criteria may apply, regardless of their enlisted MOS or basic branch.

3. BASIC EDUCATION REQUIREMENTS:

a. Applicants must have at least 60 transferable credit hours from an accredited college/university, of which - a minimum of 30 credit hours must have been completed in-residence. Student should have maintained a Grade Point Average (GPA) of 2.5 in resident courses.

b. The requirement for 60 credit hours include completion of the courses listed below in-residence with grades equal to C or better. All transcripts submitted for evaluation should be official from every college attended. Transfer credit as awarded by another college/university other than the affiliate university will not be accepted. Correspondence courses, College Level Examination Program (CLEP), and credit granted for military experience from MOS training do not meet the criteria for in-resident semester hours.

(1) English Composition I - 3 semester hours

(2) English Composition II - 3 semester hours

(3) Humanities/Social Sciences - 6 semester hours, i.e. Literature, History (including Western Civilization), Ethics, Philosophy, and Language. The affiliate university is the determining factor.

(4) Anatomy - 3 semester hours (lab not required)

(5) Physiology - 3 semester hours (lab not required, combination of anatomy and physiology courses are acceptable)

(6) Chemistry - 6 semester hours (lab not required)

(7) Algebra - 3 semester hours (or other higher level math course, i.e. Statistics)

(8) Psychology - 3 semester hours

c. Historically, academic failures in the IPAP were due to students lacking a fundamental knowledge base in anatomy/ physiology, chemistry, and mathematics. Therefore, applications will not be accepted from those who lack criteria as listed above.

d. Applications will not be accepted from soldiers who are currently enrolled in school, or attempting to complete the mandatory civilian education requirements. All requirements must be met prior to submission of packet.

e. To obtain college credit for military service courses, soldiers are encouraged to request an Army/American Council on Education Registry Transcript by writing to Manager, AARTS Operations Center, 415 McPherson Avenue, Ft. Leavenworth, KS 66027-1373. Award of military credit as awarded by or transferred from another college/university other than the affiliate university, will not be accepted.

f. The final source for all decisions regarding required course equivalency (see para 3b, 1-8) is the current university affiliate.

4. APPLICATION PACKET ASSEMBLY:

a. Assemble application packets in an orange, Army Medical Specialist Corps individual file folder, secured at the top with a two-prong fastener, labeled with Name, SSN, and NG state affiliation. Notebooks will not be used.

b. Assemble packets with all documents/tabs on the right side of the folder. Documents printed landscape should be so oriented that the paper's top edge is toward the center of the folder.

c. The packet should be set up as outlined in enclosure 2, using tabs lettered as shown (A-U). Only the appropriate materials will be under each tab. If the indicated information does not apply, indicate under the tab, "Not Applicable" on a sheet of plain white paper. By doing so, you will communicate to the board that the tab was not used, nor overlooked.

d. Certify copies of professional certifications or licenses as "true copies".

e. Utilize a one to two page Biographical Sketch/Summary (IAW NGR (AR) 600-200 or NGR (AR) 600-100, as applicable) only to provide the board with more detail about an applicant's experience.

APPLICATION PACKET CHECKLIST FOR PA TRAINING PROGRAM

_____

(NAME) (SSN) (STATE)

TAB DESCRIPTION

____ A. Applicant's handwritten (typed copy must be provided underneath), one page letter of intent explaining motivation for seeking PA training, and expectations upon completion.

____ B. Biographical Sketch/Summary (IAW NGR (AR) 600-200 or NGR (AR) 600-100, as applicable – Enlisted/Officer)

____ C. Three letters of recommendation - current within 12 months.

____ 1. Unit Commander.

____ 2. ARNG (Officer) Medical Corps (MC), Army Nurse Corps (AN) or ARNG PA - based on interview.

____ 3. Individual in a position to evaluate professional competence and technical ability.

____ D. Current DA Form 705, Army Physical Fitness Test (APFT) Score Card - current within 6 months of the selection board date.

____ E. Most recent NCO Evaluation Report (NCOER)/Officer Evaluation Report (OER) - last three (3), if applicable.
NOTE: If applicant is not an NCO, it is highly recommended that a developmental counseling form (DA Form 4856) is completed by their first sergeant or company commander which provides an indication of the soldier's level of performance for the board's review.

____ F. Certified copy, DA Form 2-1.

____ G. Official DA Photograph (full length or ¾ digital).

____ H. DD Fms 2808 and 2807-1, Report of Medical Examination and Report of Medical History to include alcohol/drug test and date and results of last HIV test. Physical IAW Chapter 2, AR 40-501 - current within 2 years from start date of course.

____ I. Copy of Baccalaureate level college degree(s) and higher - if applicable.

____ J. Official College transcripts evaluated and approved by the Univ. of Nebraska. Credit hours need to be reflected as semester hours.

____ K. SAT Scores

____ L. Copies of Professional Licenses and Registrations.

____ M. Required waivers.

____ N. Letter of application to include required statements.

____ O. Personnel Qualification Record (PQR).

____ P. Copies of Awards, Certificates.

____ Q. Prior service records (for experience evaluation only - i.e, DA Fm 1059s, DD Fm 214s, etc.)

____ R. NGB Form 62-E, Application for Federal Recognition (Endorsements 1 and 2 need to be completed.)

____ S. Verification/evidence of security clearance - must have secret clearance, or evidence of a clearance in process.

____ T. NGB Form 64, Application for Training - for PA course. Must be signed by State Training Manager.

____ U. Memorandum indicating Federal Recognition eligibility - signed by State Personnel Officer.

---ENLISTED/WARRANT OFFICER EXAMPLE---

(UNIT LETTERHEAD)

APPLICATION LETTER FOR INTERSERVICE PHYSICIAN ASSISTANT
(Enlisted or Warrant Officer at time of application)

SUBJECT: Interservice Physician Assistant Statements of Understanding

1. I hereby make application for the Interservice Physician Assistant Program (IPAP). Upon successful completion of Phase II training, I will, if tendered, accept appointment as a commissioned officer in the Army National Guard of the United States (ARNGUS) for a period of six years. If appointment as a commissioned officer is not tendered or accepted, I understand I will be required to serve the period specified by my enlistment, or enlistment extension.

2. If selected to participate in this training program, I will extend my enlistment so that I meet the 6 year service obligation after completion of the course in accordance with NGR 351-1, paragraph 1-11c. I further understand that I may not be voluntarily retired prior to completion of my service obligation.

3. I agree to complete the educational requirements of Phase I, Phase II, the Army Medical Department (AMEDD) Officer Basic Course (OBC), and to serve in an active status as a commissioned officer in the Army National Guard for a period of six years after successful completion of Phase II.

4. I understand that I will remain in an officer candidate status for the duration of the two years of Phase I and Phase II training. Appointment as a commissioned officer will not be tendered until successful graduation from Phase II training.

5. I meet all prerequisites listed in the cited memorandum or have requested the appropriate waivers.

6. To the best of my knowledge, I do not have a physical profile or a medical condition that could prohibit my appointment as a commissioned officer per AR 40-501, chapter 2.

7. To the best of my knowledge, I am eligible for appointment IAW AR 135-100 (Appointment of Commissioned Officers and Warrant Officers of the Army), AR 135-101 (Appointment of Reserve Commissioned Officers for Assignment to Army Medical Department Branches), and NGR 600-100 (Commissioned Officer - Federal Recognition and Related Personnel Actions). I have reviewed my DA Form 2-1, Personnel Qualification Record and it is current and accurately posted.

8. I agree to serve in an active enlisted status for the remaining period of my enlistment and will be reassigned in accordance with the needs of the Army National Guard if:

a. I fail to successfully complete the training for any reason.

b. I do not receive a Reserve appointment as a commissioned officer.

c. I refuse to accept a Reserve appointment as a commissioned officer when tendered.

d. I fail to receive an award of the AOC 65D upon completion of Phase II training.

e. If I fail to successfully complete Phase I or Phase II for any reason.

f. I fail the National Commission on Certification of Physician Assistants (NCCPA) examination twice.

9. I understand that I will be required to take the National Commission on Certification of Physician Assistants (NCCPA) examination at the first available examination date for which I am eligible. I understand that if I fail to successfully pass the examination after my second attempt I will not be assigned or function as a PA in the ARNG, and may be involuntarily separated upon completion of my service obligation. I further understand I will be required to maintain NCCPA currency as outlined by the certifying authority. I understand that if I fail the first NCCPA examination that the second examination will be at my expense.

10. If I have received an Enlistment Bonus or reenlistment/extension bonus, I understand that, if selected for this training, I will refund the percentage of my bonus equal to the percentage of obligated service I will not perform in the specified MOS.

11. I am not a user of illegal drugs, abuse controlled substances or consume excessive amounts of alcoholic beverages.

12. I understand that if I have ever been arrested or convicted of any offense as stated in Para 2-9, NGR 600-100, I will request a waiver for each offense to NGB-ARP-CO.

13. I certify the forgoing statements are true, complete and accurate to the best of my knowledge and beliefs, and are made voluntarily and in good faith.

PAT D. APPLICANT
123-45-6789
SSG, Co C, 204th Bn

---COMMISSIONED OFFICER EXAMPLE---

(UNIT LETTERHEAD)

APPLICATION LETTER FOR INTERSERVICE PHYSICIAN ASSISTANT
(Commissioned Officer at time of application)

SUBJECT: Interservice Physician Assistant Statements of Understanding

1. I hereby make application for the Interservice Physician Assistant Program (IPAP). If accepted for this program, no earlier than 30 days prior to the scheduled start date of my course, I will be conditionally re-appointed to the SP Branch with a primary Area of Concentration of 00E65. Re-appointment will in all cases require a Constructive Service Credit calculation IAW AR 135-101. The credit awarded is applied at the rate of ½ day credit for each day and applies to all prior Commissioned Officer service. If I accept conditional appointment as a commissioned officer in the Army National Guard of the United States (ARNGUS) as a 00E65 I understand that my rank and date of rank will be reduced. I agree to serve as a 65D for a period of six years following completion of this program. If appointment as a commissioned officer is not tendered or accepted, I understand I will be required to serve the period specified by my agreement in a capacity that meets the needs of the service, normally in the specialty held prior to conditional re-appointment.

2. If selected to participate in this training program, I will commit to a 6-year service obligation after completion of the course in accordance with NGR 351-1, paragraph 1-11c. I further understand that I may not be voluntarily retired prior to completion of my service obligation.

3. I agree to complete the educational requirements of Phase I, Phase II, the Army Medical Department (AMEDD) Officer Basic Course (OBC), and to serve in an active status as a commissioned officer in the Army National Guard for a period of six years after successful completion of Phase II.

4. I understand that I will remain a Commissioned Officer candidate status for the duration of the two years of Phase I and Phase II training.- DELETE. It is N/A here. Conditional status of the appointment as a commissioned officer will not be removed until successful graduation from Phase II training and successful completion of the NCCPA examination. I further understand that I will not be in a promotable status while in this training program.- delete this. Let the states decide on promotion while in course. Some will be eligible inside the 2 years. The AC will and does promote officers during the course.

5. I meet all prerequisites listed in the cited memorandum or have requested the appropriate waivers.

6. To the best of my knowledge, I do not have a physical profile or a medical condition that could prohibit my appointment as a commissioned officer per AR 40-501, chapter 2.

7. To the best of my knowledge, I am eligible for permanent appointment as a 65D IAW AR 135-100 (Appointment of Commissioned Officers and Warrant Officers of the Army), AR 135-101 (Appointment of Reserve Commissioned Officers for Assignment to Army Medical Department Branches), and NGR 600-100 (Commissioned Officer - Federal Recognition and Related Personnel Actions). I have reviewed my DA Form 2-1, Personnel Qualification Record and it is current and accurately posted.

8. I agree to serve in an active status for the remaining period of my agreement and will be reassigned in accordance with the needs of the Army National Guard if:

a. I fail to successfully complete the training for any reason.
b. I do not receive a Reserve permanent appointment as a commissioned officer.
c. I refuse to accept a Reserve permanent appointment as a commissioned officer when tendered.
d. I fail to receive an award of the AOC 65D upon completion of Phase II training.
e. I fail to successfully complete Phase I or Phase II for any reason.
f. I fail the National Commission on Certification of Physician Assistants (NCCPA) examination twice.

9. I understand that I will be required to take the National Commission on Certification of Physician Assistants (NCCPA) examination at the first available examination date for which I am eligible. I understand that if I fail to successfully pass the examination after my second attempt I will not be assigned or function as a PA in the ARNG, and may be involuntarily separated upon completion of my service obligation. I further understand I will be required to maintain NCCPA currency as outlined by the certifying authority. I understand that if I fail the first NCCPA examination that the second examination will be at my expense.

10. I understand that if I do not have a Bachelor's Degree (or higher) at the time of application for the IPAP program that I will need to request an exception to policy through NGB-ARS to the Office of the Surgeon General (DASG-PTZ).

11. I am not a user of illegal drugs, abuse controlled substances or consume excessive amounts of alcoholic beverages.

12. I understand that if I have ever been arrested or convicted of any offense as stated in Para 2-9, NGR 600-100, I will request a waiver for each offense to NGB-ARP-CO.

13. I certify the forgoing statements are true, complete and accurate to the best of my knowledge and beliefs, and are made voluntarily and in good faith.

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