

APPLICATION FOR AN EDUCATIONAL ROTATION AT TRIPLER ARMY MEDICAL CENTER FOR 3RD AND 4TH YEAR MEDICAL STUDENTS

Data required by the Privacy Act of 1974 as amended.

AUTHORITY: 42 USC 13041, 10 USC 3013 and AR 190-45, Law Enforcement Reporting.

PRINCIPAL PURPOSE: The provided information will be used to obtain background information through local records checks with the Army Law Enforcement Reporting Tracing System (ALERTS) and Criminal Justice Information System (CJIS).

ROUTINE USE: To initiate background check requirements of the statutes.

DISCLOSURE: Providing information is voluntary. Failure to provide information may result in disapproval of the application and denial of the requested learning opportunity.

INSTRUCTIONS, REQUIREMENTS AND SUBMISSION PROCEDURES

1. **Please follow these instructions carefully.** This form was designed to collect all information needed to establish your file for your educational rotation.
2. Please use the information contained in the pull-down menus and enter dates in the dd-mmm-yy format, e.g., 23-Feb-89, and numbers without spaces or dashes, e.g., 123456789.
3. **Application must be received no later than 75 days prior to start of educational rotation start date.**
4. **No rotations will be scheduled during the months of November and December.**
5. **All educational rotations start on a Monday and end on a Friday. NO EXCPTIONS.** If Monday falls on a Federal holiday then start date will be Tuesday.
6. Students from other uniformed services and civilian students are welcome on a space available basis from January through May.
7. **Please follow the following instructions to submit your application via DoD SAFE (Department of Defense Safe Access File Exchange) website at <https://safe.apps.mil>.**
 - a. All students will request a drop-off code prior to submitting the application.
 - b. Request for drop-off code is to be submitted to the following address usarmy.tripler.medcom-tamc.mbx.student-clerkships@mail.mil. **DO NOT SEND REQUEST FOR DROP-OFF OR APPLICATION TO A DIFFERENT EMAIL ADDRESS OTHER THEN WHAT IS LISTED HERE.**
 - c. You will receive an email from the DoD SAFE website to upload your information. **PLEASE FOLLOW THE INSTRUCTIONS THAT IS CONTAINED IN THE NOTE SECTION OF THE EMAIL. THIS IS A VERY IMPORTANT PART OF THE APPLICATION PROCESS.**
 - d. **Personal Identifiable Information (PII).**
 - (1) **Since the application contains PII the application must be encrypted prior to uploading or by clicking the "Encrypt every file" checkbox on the DoD SAFE drop-off site.**
 - (2) Sender is responsible for providing the recipient(s) with the "encryption passphrase" used in the DoD SAFE application drop-off. **Sender will include the passphrase in the "Note" section when dropping off files.**
8. **Reminder that you cannot save the information entered on this form.** After completing required entries you must print, sign, and upload the form to the **DoD SAFE** (Department of Defense Safe Access File Exchange) website at <https://safe.apps.mil> and emailed to usarmy.tripler.medcom-tamc.mbx.student-clerkships@mail.mil.

Application continues on back.

APPLICANT INFORMATION

Last Name	<input type="text"/>	First Name	<input type="text"/>	Middle Initial	<input type="text"/>
Gender	<input type="text"/>	SSN	<input type="text"/>	Date of Birth	<input type="text"/>
				US Citizen	<input type="text"/>
E-mail address	<input type="text"/>			Phone Number	<input type="text"/>
School	<input type="text"/>				
Training Category	<input type="text"/>			Academic year during training	<input type="text"/>

EDUCATIONAL ROTATIONS AVAILABLE HERE AT TRIPLER

Please select from the drop down box below the program that your are planning on rotating with. Reminder that all request must be pre-approved prior to submission.

Educational Rotation	<input type="text"/>	Are you interviewing for this program?	<input type="text"/>
Dates of training:	Start	<input type="text"/>	End
		<input type="text"/>	<input type="text"/>

DEPARTMENT OF VETERANS AFFAIRS (DAV)

For those civilian students interested in one of the DAV programs here at Tripler, please select from the drop down box below for the program that you are planning on interviewing with, and that you have been pre-approved for the rotation.

Educational Rotation	<input type="text"/>
Dates of training:	Start
	<input type="text"/>
	End
	<input type="text"/>

JOINT KNOWLEDGE ONLINE INFORMATION

Do you have a JKO Account?	<input type="text"/>	If yes, what is your JKO username?	<input type="text"/>
Do you have a CAC?	<input type="text"/>	EDIPI number from back of CAC :	<input type="text"/>

GENESIS INFORMATION

Have you completed MHS Genesis Training?	<input type="text"/>	If yes, where?	<input type="text"/>
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Signature of Student

Current Date