

**Call for Nominations for Physician Assistant Professional Advisory Group
Deadline Date: 30 May 2009**

The Physician Assistant Professional Advisory Group (PAPAG) provides advice to the Surgeon General, through the Health Services Professional Advisory Committee (HS-PAC) and the Health Services Chief Professional Officer, on professional and personnel issues related to Department of Health and Human Services (HHS) and Commissioned Corps of the U.S. Public Health Service (Corps) Physician Assistants (PA). Selections are based on the nominee's commitment to public health and PA activities in addition to specified criteria (e.g., organizational, discipline, gender, and minority representation). Selections are made by the PAPAG voting membership.

Self-Nomination Form:

PHYSICIAN ASSISTANT PROFESSIONAL ADVISORY GROUP
SELF-NOMINATION FORM: 2010

The Physician Assistant Professional Advisory Group (PAPAG) provides advice to the Surgeon General, through the Health Services Professional Advisory Committee (HS-PAC) and the Health Services Chief Professional Officer, on professional and personnel issues related to Department of Health and Human Services (HHS) and Commissioned Corps of the U.S. Public Health Service (Corps) Physician Assistants (PA). Selections are based on the nominee's commitment to public health and PA activities in addition to specified criteria (e.g., organizational, discipline, gender, and minority representation). Selections are made by the PAPAG voting membership.

I am interested in serving on the PAPAG for a 3-year term beginning January, 2010. If selected, I am expected to participate in all teleconference meetings, unless excused by the PAPAG Chair. I also agree to participate in PAPAG subcommittees and other PAPAG activities. I understand that each PHS active duty voting member shall meet and maintain Office of Force Readiness and Deployment (OFRD) basic readiness qualifications (PHS Commissioned Corps officers only) and that membership in PHS Academy of Physician Assistants (PHSAPA) is strongly encouraged, but not required.

Name:

Rank:

PHS Serial Number:

CAD (Call to Active Duty Date):

Duty Station Address:

Operating Division/Program:

Institute/Center:

Mail Stop:

City:

State:

Zip Code:

Duty Phone Number:

Fax:

Email Address:

Gender: M___ F___

Race or Ethnicity:

Primary Duty: Clinical___ Administrative___

OFRD Basic Readiness: Yes___ No___

Active Duty PHS Officer: Yes___ No___

PHS Civil Service: Yes___ No___

Inactive Reservist: Yes___ No___

Retired PA: Yes___ No___

Are you a member of the PHS Academy of PA's? Yes___ No___

PAPAG Activities/Subcommittees of Interest to Me:

___Awards ___Recruitment ___Communication ___Readiness ___Mentor
___Membership ___Career Development ___Anything that would be of help

I have included a copy of my current CV (including summary sheet) and a cover letter describing how my specific experience and expertise will benefit the PAPAG.

E-mail application, CV (including summary sheet) and cover letter to:

JEFF.BUCKSER@DHS.GOV

Nomination packages will not be considered unless all items are submitted. Notification of receipt will be sent to you.

NOMINATIONS MUST BE RECEIVED BY MAY 30, 2009.

Reference:

http://www.usphs-hso.org/pac/subcommittees/career_development/cv.shtml for CV format

<http://www.aapa.org/memship-cat.html> for PHS Academy of PA application and information

http://www.usphs-hso.org/pags/papag/papag_main.shtml for PAPAG information and bylaws

For more information, contact:

CDR Jeff Buckser – jeff.buckser@dhs.gov