



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Public Health Service Commissioned Corps

POST-9/11 GI BILL EDUCATIONAL BENEFITS TRANSFERABILITY COMMITMENT AND STATEMENT OF UNDERSTANDING

(Privacy Act Notice is on the Third Page)

1. Service Member Information (Print or Type)

Form with fields for: a. Name (Last, First, Middle Initial), b. Grade/Rank, c. DoD ID # (On back of CAC), d. PHS SERNO, e. TEB Web App. Date, f. Agency, g. Call-to-duty-date, h. Work Email

2. Basic Eligibility Criteria and Transferability Acknowledgement

Read and check each item below as applicable:

- 1. I have completed a minimum of 6 years in the Uniformed Services (Active Duty and/or Selected Reserve)
2. I participated in the PHS JRCOSTEP Program from: _____ to _____ Service as a JRCOSTEP is not considered service calculated for 6 years of eligibility.
3. I attended a Service Academy or Reserve Officer Training Corps (ROTC). Officers without earlier established eligibility following commission through the Service academies... My Service Academy or ROTC obligation ends/ended on _____
4. I attended the Uniformed Service University of the Health Sciences (USUHS). Service performed at USUHS is not considered service calculated for 6 years of eligibility. My USUHS Service dates are from: _____ to _____
5. I participated in the Student Loan Repayment Program (SLRP). Officers participating in the SLRP in accordance with Chapter 109 of Title 10, USC, should be aware that your service counted pursuant to Chapter 109 does not count as qualifying active-duty service for eligibility to transfer PGIB education benefits. Any service after your obligation period of service may qualify as active-duty service for eligibility to transfer PGIB education benefits. My SLRP obligation ends/ended on _____
6. I am on limited duty or undergoing an evaluation to determine my Fitness for Duty (FFD). Officer must wait until the process is complete before transferring benefits.

3. Obligation Acknowledgement

Approval of my request to transfer my educational entitlement to my spouse and/or dependent child (ren) obligates me to the following.

- I agree to serve for 4 years in the Uniformed Services (Active Duty and/or Selected Reserve) from my Transferability Election of Benefits (TEB) web application request date as indicated in block 1e above.

Note: The web application date is the date the request was made in milConnect.

4. Statement of Understanding

I understand that (*Read and check each item below*):

1. This service agreement runs concurrently with any remaining obligated service time, except obligations noted in Section 2.4 and 2.6.
2. This agreement may be fulfilled on active duty or in the Selected Reserve, or a combined service of both.
3. This service agreement does not obligate any Uniformed Service to retain me on active duty or in the Selected Reserve.
4. Failure to complete this service agreement due to my own volition will lead to termination of my entitlement for transferability and may create an overpayment by the Department of Veterans Affairs for any payments made after my date of separation from active duty.
5. I am responsible for any overpayments due to not fulfilling this agreement.
6. I may transfer up to 36 months (or my remaining months of entitlement, whichever is less) of my education benefits to spouse and/or child (ren), and that I can modify or revoke my election at any time.
7. My spouse may use the benefits immediately and child (ren) (ages 18-26) may use the benefits after I have served 10 years in the Uniformed Services.

5. Service Member Certification

I certify that I have read and understand CCI 671.01 and I have read and agree to abide by the terms of this statement of understanding as stated above and that the above information is true and correct. Further, I understand that making a false statement or claim against the U.S. Government is punishable by a fine, or imprisonment, or both. 18 U.S.C. § 287; 18 U.S.C. § 1001.

PRINTED NAME

SIGNATURE

DATE

6. Routing Instructions

- E-copy to phsdeersgibill@hhs.gov
- Copy to Service Member

7. For CCHQ Use Only

Cleared:

Yes

No

Action:

Approved

Pending Review

Rejected

No TEB Request

Emailed:

CCHQ Remarks