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PROFESSIONAL QUALIFICATIONS MEDICAL/PEER REVIEWERS

The Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports (0720-0005), 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

ALITHODITY	Privacy Act Statement						
AUTHORITY:	10 U.S.C. 1079, 1086 and 1092						
PRINCIPAL PURPOSE:	To solicit the professional qualifications of medical specialists and their credentials for Medical/Peer Reviewers positions. Individuals selected will review medical documentation contained in appeal or hearing case files.						
ROUTINE USE:	None.						
DISCLOSURE:	Voluntary. No effect on respondents for not providing requested information.						
Physician's/Reviewer's Name:		Year of Birth:					
Address:							
Medical Education .							
State:	1000	Year of Degree:					
School:		Year of License:					
American Specialty Boards:							
Specialties:		'					
Type of Practice:							
Type of Fractice.							
National Scientific Medical Societies:							

Professional Appointments							
State:	School:	, managa 4,000					
Title and Current Status:		• 11.0-14					
Other Information:							
Sources of Information (Professional Listing)							
Name of Directory:	4						
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Other Sources:			, , , , , , , , , , , , , , , , , , ,	I			
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