



DIMO Instructor Application

Name (Last, First, MI):		Grade/Rank: /	
Service Branch/Agency:		Status:	Spec Code/MOS:
Mil/Medical Specialty:		CORPS:	SEI / AQD:
Unit Name/Office Symbol:		Unit Address:	
City/Base:	State:	Zip Code:	
Work Email:		Home Email:	
Home Phone:		Phone (Comm):	
Are you currently a vetted DIMO instructor?		Yes	No
		Gender:	
SELECT the COCOM you are currently assigned to:		AF Only: SELECT the MAJCOM you are currently assigned to:	

DIMO COURSES

HUMANITARIAN ASSISTANCE & DISASTER RELIEF

- D319310**, Disaster Planning - Basic
- D319316**, Disaster Planning - Advanced
- D319320**, Disaster Planning & Emerg. Management (Sr. Leaders)
- D319321**, Public Health Emergencies: Humanitarian Assistance & Disaster Response

FORCE HEALTH PROTECTION

- D319314**, Operational Preventive Medicine
- D319318**, Infection Control of High Consequence Infectious Disease

CBRNE THREATS

- D319322**, CBRN Incident & Medical Response

BUILDING PARTNER CAPACITY

- D175134**, GBV & Women's Health (Resident)
- D175466**, Exec Healthcare Resource Management (Resident)
- D175467**, HIV / AIDS Planning & Policy Development Resident)
- D319050**, Medical Planning - Advanced
- D319051**, Point Of Care Ultrasound
- D319304**, Mental Health Services - Combat Related/PTSD
- D319307**, Surgical Trauma Response Techniques
- D319308**, Fundamentals of Healthcare Administration
- D319311**, Nursing Leadership
- D319110**, Aeromedical Evacuation Team (AMET)
- D319315**, MASCAL Response & Casualty Evacuation
- D319323**, Gender-Based Violence (GBV)
- D319326**, Outbreak Detection & Response
- D319331**, International Trauma Life Support (ITLS)**
- D319335**, Medical Planning - Basic
- D319058**, Tactical Combat Casualty Care (TCCC)** **NAEMT**
- D319338**, Medical Skills Instruction & Simulation

** TCCC: ONLY **NAEMT** TCCC Instructor Certs. will be accepted. Must submit Cert. if requesting this course.

** ITLS: Must submit ITLS or ATLS Instructor Certs.

EDUCATION

Name of School/Institution	Degree/Certification Awarded	Date Completed

Please describe your current and two previous jobs. Provide dates, unit, duty title and a brief description of your duties/responsibilities.

Current Unit:	Dates:
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Current Duty Title:

Duties/Responsibilities:

1st Previous Unit:	Dates:
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Duty Title:

Duties/Responsibilities:

2nd Previous Unit:	Dates:
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Duty Title:

Duties/Responsibilities:

DEPLOYMENTS/INTERNATIONAL EXPERIENCE

Please describe any deployment experience or experience working with foreign nationals.

Official Government Passport (MM/DD/YYYY): <input type="checkbox"/> Yes, Expiration Date _____ <input type="checkbox"/> No	Tourist Passport (MM/DD/YYYY): Yes, Expiration Date _____ No
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TEACHING EXPERIENCE

Briefly describe your teaching experiences, list any teaching awards/recognition. Attach teacher certs. or cards.

FOREIGN LANGUAGE SKILLS		USAF LEAP: Yes No	
Language	Proficiency (Limited/Conversational/Technical)	DLPT Scores	Date

Language	Proficiency (Limited/Conversational/Technical)	DLPT Scores	Date

REFERENCES

Please provide names and contact information for three professional references.

Name	Email	Phone