

Senator Larry E. Craig
APPLICATION FOR NOMINATION TO A U.S. SERVICE ACADEMY
490 Memorial Drive, Suite 101
Idaho Falls, Idaho 83402 Phone 208-523-5541

DATES TO REMEMBER:

October 31 Initial application is due (pages 1 to 3). No applications will be accepted after this date.

December 1 ALL required material must be received by Sen. Craig by this date. This includes:

- A recent photograph (Clear image, not blurred)
- School transcript of grades (Certified copy, in a sealed envelope from the school)
- Test Scores: ACT or SAT (Certified copy, in a sealed envelope from the school or testing agency)
- Proof of Residency* (*Only for Idaho residents applying from out of state)
- Principal/Counselor Form (In a sealed envelope)
- (3) Letters of Reference (In sealed envelopes from teachers, adult friends, employers, etc.)
- Essay: "Why I want to attend an Academy"
- List of Activities, hobbies, honors (School organizations, athletic awards, community service, elected offices, etc.)

December 30 Nominations will be announced by this date.

Indicate preference in numerical order (example: 1st, 2nd,) **Do not designate any academy you would not accept.**

Air Force _____	Military _____	Naval _____	Merchant Marine _____
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Full Legal Name _____

"Nickname" _____ Phone Number (_____) _____

Permanent Address _____

City, County, State, Zip _____

Current Address _____

(If not the same as above)

City, County, State, Zip _____

Social Security Number _____ Date of Birth _____

Previous Military Experience? Yes _____ No _____

If "Yes," state branch, rank, and years of service _____

High School _____ Age _____ Height _____ Weight _____

Father's Name _____

Address _____ City _____ State ____ Zip _____

Occupation _____ Where Employed _____

Mothers Name

Address _____ City _____ State ____ Zip _____

Occupation _____ Where Employed _____

Does Your Father Have Military Experience? Yes _____ No _____

If "Yes," state branch, rank, years of service.

Does Your Mother Have Military Experience? Yes _____ No _____

If "Yes," state branch, rank, years of service.

Is Your Father or Mother a Disabled Veteran? Yes _____ No _____

If "Yes," please give details.

Number of Brothers _____ Number of Sisters _____

Please list the names of High Schools, Prep Schools, and Colleges you are now attending or have attended:

Names of School	Date Graduated or Expected to Graduate
_____	_____
_____	_____
_____	_____

List your grades in the following subjects:

Civics/Govt.	_____	Chemistry	_____
Physics	_____	U.S. History	_____
Algebra	_____	English Comp.	_____

<p>Grades Based On (circle one) High School College Prep School</p>
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High School Scholastic Standing (rank in class) No. _____ in class of _____.

High School Grade Point Average _____ College GPA _____

SAT Scores Verbal _____ Math _____

ACT Scores English _____ Math _____ Reading _____ Sci. Reas. _____

Other _____

Are you scheduled to take the: SAT _____ WHEN _____

ACT _____ WHEN _____

Have you made other requests for an Academy Nomination? _____

If so, with whom? _____

SIGNATURE _____ DATE _____

Contact the Academies you are serious about attending. Each academy will need to develop a file about you.

ADDRESS OF ACADEMIES

1. United States Air Force Academy

**HQ USAFA/RRSS
USAF Academy
Colorado Springs, Colorado 80840
www.usafa.af.mil**

2. United States Naval Academy

**Superintendent
Attn: Director of Candidate Guidance
United States Naval Academy
Annapolis, Maryland 21402
www.usna.edu**

3. United States Military Academy

**Director of Admissions
United States Military Academy
West Point, New York 10996
www.usma.edu**

4. United States Merchant Marine Academy

**Admissions Office
United States Merchant Marine Academy
Kings Point, New York 110241
www.usmma.edu**

TIPS and IMPORTANT INFORMATION

Send Certified Test Scores

Like colleges, senators have test score mailing codes for your convenience. Please make sure to use these codes to send a certified copy of your SAT or ACT scores along with certified copies of school transcripts.

SAT code: 4468 ACT code: 7123

Contact the Academies Early:

It is very important to contact the academies early so medical tests may be scheduled and completed. On occasion a medical waiver may be required and because the process is lengthy, you want to ensure yourself enough time to complete the process before it costs you acceptance into an academy.

Residency Requirements:

When seeking an academy nomination from your Senators or Representatives, **you may not apply in more than one state.**

Apply within the state that is your legal residence. Out of state students must use their parents' legal residence as their own. If you are a student in Idaho but your parents' legal residence is in another state, you must request a nomination from the Congressional representatives in your parents' state. Listed below are key questions that determine residency for you and your parents:

In which state do your parents pay taxes?

In which state are your parents' cars registered?

In which state do your parents vote?

You may request a nomination in Idaho if your father or mother is a legal resident of another state yet your other parent works in Idaho and is able to answer yes to the above questions.

If you are applying from out of state, please provide proof you meet the residency requirements.

NOMINATION PACKET CHECKLIST

All these Items are due by December 1

- A recent photograph** (Must have a clear image, not blurred)
- School transcript of grades with your class ranking** (Certified copy, in a sealed envelope from the school)
- Test Scores: ACT or SAT** (Certified copy, in a sealed envelope from the school or testing agency)
- Proof of Residency*** (*Only for Idaho residents applying from out of state)
- Principal/Counselor Form** (In a sealed envelope)
- (3) Letters of Reference** (In separate sealed envelopes from teachers, adult friends, employers, etc.)
 1. _____
 2. _____
 3. _____
- Listing of activities, hobbies and honors,**
(School Organizations, athletic awards, community service, elected offices, etc.)
- Essay: “Why I want to attend an Academy”**

**Mail all items together with the Checklist
in a single large envelope to:**

(Test scores from testing agencies may arrive separately)

**US Senator Larry E. Craig
490 Memorial Drive, Suite 101
Idaho Falls, Idaho 83402**

Please call (208) 523-5541 with any questions.



U. S. Senator Larry E. Craig

School Principal or Guidance Counselor
U. S. Service Academy Candidate Evaluation Form

Candidate's Name: _____

Dear Principal or Counselor:

Thank you for taking the time to advise me in the evaluation process as to the qualifications of the potential nominee as a military officer in the service of the United States. Your response is of great importance and is highly appreciated. Please return this complete form, **in a sealed envelope**, to the applicant for inclusion in their application package. Packages are due December 1.

1. What are his/her leadership capabilities?
2. How well does he/she get along with peers and what do they think of him/her?
3. Strengths and Weaknesses:
4. How well does the applicant work under pressure?
5. Please feel free to express any personal thoughts or additional observations.

School: _____ Phone: _____

Signature: _____ Date: _____

Printed Name: _____ Title: _____

(By law the candidate may see this completed form upon request.)