



# THELMA DRAKE

United States Representative ■ Second District of Virginia

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## SERVICE ACADEMY NOMINATION Application Packet Classes Entering 2009

U.S. NAVAL ACADEMY  
U.S. MILITARY ACADEMY AT WEST POINT  
U.S. AIR FORCE ACADEMY  
U.S. MERCHANT MARINE ACADEMY

The Honorable Thelma Drake  
Attn.: Academy Coordinator  
4772 Euclid Road, Suite E  
Virginia Beach, Virginia 23462  
(757) 497-6859  
(757) 497-5474 Fax  
<http://drake.house.gov>



HOUSE OF REPRESENTATIVES  
WASHINGTON, D.C. 20515

THELMA DRAKE  
SECOND DISTRICT  
VIRGINIA

Dear Applicant,

Thank you for contacting me about a nomination to one of our nation's Service Academies.

Without a doubt, the Service Academies are some of the finest schools in the United States. Not only do they teach academics, but instill discipline, commitment and leadership in the young Americans who attend. These Academies provide a wonderful and unique opportunity to learn, grow, and serve our great Nation as a member of the Armed Forces.

Although I am able to nominate a select few individuals each year, those decisions are among the most important and difficult that I make as your Representative in Congress. Competition is very keen; therefore, it is wise for applicants to apply through all nominating authorities (U.S. Representatives, U.S. Senators, the Vice President and the President) for which they are eligible.

If you need additional information, please do not hesitate to contact my Hampton Roads office at (757) 497-6859 or contacting the Academy Coordinator, Arch Walpole, directly by email to [arch.walpole@mail.house.gov](mailto:arch.walpole@mail.house.gov).

I look forward to receiving your application and thank you, again, for your interest in serving our nation.

Sincerely,

  
Thelma Drake  
Member of Congress



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## APPLICATION PROCEDURE

**NOTE TO APPLICANT:** It is the responsibility of each applicant to initiate a pre-candidate file at each Academy to which they are seeking a nomination. If an applicant is not registered with the Academy(ies) of their choice, nomination applications will be returned. Addresses and contact numbers for the Academies are provided below.

1. **Application form:** Complete application form and attach a photograph on page six (6), upper right-hand corner.

*Note to recommending officials:* If you are concerned about keeping confidentiality with your evaluation or with the transcript, do the following:

- a. Put the evaluation or transcript in an envelope and seal the envelope.
- b. Sign over the seal.
- c. Put scotch tape over the signature
- d. Give the envelope to the Academy applicant.

The Office of Congresswoman Drake will not open or accept any envelope with a broken seal. This process insures that the applicant is able to submit their complete packet and will ensure that your confidentiality remains secure.

The deadline for all applications is Friday, October 31, 2008.

2. **Letter of recommendation:** Ask your high school counselor or principal to provide a letter of recommendation as well as two others, such as a math or science teacher, coach, employer, or someone who knows you well. **Have these persons send or return the letters *to you* in sealed envelopes with their signature across the seal of the envelope.**
3. **Transcripts:** Ask your counselor for a copy of your transcript. Make sure the transcript includes your course listings and grades, current GPA and class rank (if provided by your high school), approximate size of your graduating class, and SAT/ACT scores. **The official transcript should be returned *to you* in a sealed envelope with a signature across the seal of the envelope.**
4. **Standardized test results:** To have scores forwarded to Congresswoman Drake's district office directly from the testing center, please use the following codes: SAT – 5944, ACT – 7725. Many transcripts will include copies of your SAT or ACT scores. If so, this is sufficient and you need not send in separate score results, *unless you have updated scores.*
5. **Service Academy Application:** Your preferred service academy applications should be completed and into the appropriate service academy(ies) admission's office(s).

(Continued)

6. ***DEADLINE*** Completed application packets **must be received by Friday, October 31, 2008.**  
**DO NOT SEND YOUR APPLICATION BY CERTIFIED USPS MAIL or by any other means where a receipt signature is required.**

Send all requested information to:

The Honorable Thelma Drake  
Attn.: Academy Coordinator  
4772 Euclid Road, Suite E  
Virginia Beach, Virginia 23462

All correspondence and questions related to Second Congressional District academy nominations should be directed to the Academy Coordinator.

Concerning your inquiries, please contact the Academy Coordinator by e-mail at [arch.walpole@mail.house.gov](mailto:arch.walpole@mail.house.gov) or by phone at (757) 497-6859.

**E-mail communications with the Academy Coordinator shall be established no later than the mailing or hand delivery of the application for nomination packet.**

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**U.S. NAVAL ACADEMY**  
Director of Candidate Guidance  
Annapolis, Maryland 21402-5019  
(888) 249-7707

**U.S. AIR FORCE ACADEMY**  
Director of Admissions  
Colorado Springs, Colorado 80840  
(800) 443-9266

**U.S. MILITARY ACADEMY AT WEST POINT**  
Director of Admissions  
West Point, New York 10996  
(800) 822-ARMY

**U.S. MERCHANT MARINE ACADEMY**  
Admissions Office  
Kings Point, New York 11024  
(800) 732-6267



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## APPLICATION SCHEDULE

June 1	Application process begins.
October 31	<b>Deadline for submission of completed packet.</b> All required information should be sent or delivered to Congresswoman Drake's Hampton Roads District Office in ONE envelope and must be received or postmarked by this date.
Late December	Nominee notification by mail begins.

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## CHECKLIST FOR CANDIDATES

- Completed application form
- Photograph attached to application form
- Three (3) letters of recommendation in sealed envelopes with signatures across the sealed flap
- High school transcript in sealed envelope with school official's signature across the seal closing the envelope
- Essay
- Review completeness of the application with your guidance Counselor and ask your counselor to sign and print their name at block VII

Should *any* of these six items be omitted, the applicant's entire application will be returned for completion.



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attach photo here

## APPLICATION FORM

Answer each question as appropriate.

Please rank the Academies to which you will accept a nomination in order of preference (1-4). If you desire to attend only one particular Academy, indicate so by placing *only* the number one (1) in that academy's blank. Also, indicate whether you are pre-registered with an Academy by selecting yes or no.

\_\_\_ U.S. Air Force Academy Yes No      \_\_\_ U.S. Merchant Marine Academy Yes No

\_\_\_ U.S. Naval Academy Yes No      \_\_\_ U.S. Military Academy at West Point Yes No

Have you been contacted by an Academy Service Liaison/Contact Officer? Yes No

### I. PERSONAL INFORMATION (please print or type)

Full Name \_\_\_\_\_  
(Last) (First) (Middle Initial)

Permanent Address \_\_\_\_\_  
(Street)  
\_\_\_\_\_  
(City or Town) (State) (Zip Code)

Telephone Number: Home (\_\_\_\_\_) \_\_\_\_\_ Other (\_\_\_\_\_) \_\_\_\_\_

E-mail Address \_\_\_\_\_

Social Security Number \_\_\_\_\_ Birth Date m/\_\_\_d/\_\_\_y/\_\_\_\_\_

Place of Birth \_\_\_\_\_ U.S. Citizen? Yes No

Names of Parents/Guardians \_\_\_\_\_

Is one or both of your Parents/Guardians a domiciled resident of the Second Congressional District of Virginia? Yes No      If address different from above, please provide.

\_\_\_\_\_  
(Street)  
\_\_\_\_\_  
(City or Town) (State) (Zip Code)

Place(s) of Employment of Parents/Guardians: F: \_\_\_\_\_  
M: \_\_\_\_\_

## I. PERSONAL INFORMATION (continued)

Work Telephone Numbers of Parents/Guardians: F: (\_\_\_\_) \_\_\_\_\_

M: (\_\_\_\_) \_\_\_\_\_

Is either Parent(s)/Guardian(s) active duty, reserve, or retired military?  Yes  No

Senatorial offices to which you are seeking nomination \_\_\_\_\_

Other nominations for which you are applying:  Presidential  Vice-Presidential

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## II. ACADEMIC INFORMATION

Currently Attending:  High School  Jr. College  4-year College  Preparatory School

Name of School \_\_\_\_\_

Address of School \_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City or Town)

\_\_\_\_\_  
(State)

\_\_\_\_\_  
(Zip Code)

\_\_\_\_\_  
(Date of Graduation)

GPA (Weighted) \_\_\_\_\_ GPA (Unweighted) \_\_\_\_\_

SAT scores: Critical Reading \_\_\_\_\_ Math \_\_\_\_\_ Writing \_\_\_\_\_

ACT scores: Composite \_\_\_\_\_ English \_\_\_\_\_ Math \_\_\_\_\_ Reading \_\_\_\_\_ Science \_\_\_\_\_

Class Rank (same as official transcript data) \_\_\_\_\_ of \_\_\_\_\_, Top \_\_\_\_\_%

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## III. EXTRACURRICULAR ACTIVITIES

Please check all that apply. If you held a leadership position in any organization, list most recent position held next to organization name.

- |  |   |
|--|---|
| <input type="radio"/> American Legion Boys State, Nation | <input type="radio"/> American Legion Auxiliary Girls State, Nation |
| <input type="radio"/> Boy Scouts of America              | <input type="radio"/> Eagle Scout Award Recipient Date _____        |
| <input type="radio"/> Girl Scouts of America             | <input type="radio"/> Gold Award Recipient Date _____               |
| <input type="radio"/> National Honor Society             | <input type="radio"/> Class Officer                                 |
| <input type="radio"/> Academic Honors Club               | <input type="radio"/> Student Government                            |
| <input type="radio"/> Language Club                      | <input type="radio"/> Officer of School Club                        |
| <input type="radio"/> Debate Club                        | <input type="radio"/> School Newspaper, Yearbook Editor             |

### III. EXTRACURRICULAR ACTIVITIES (continued)

- School Band, Choir
- Rotary International: Interact Club
- Church Membership
- Other \_\_\_\_\_
- Employment (Place of) \_\_\_\_\_

- Junior ROTC
- Key Club International, Circle K
- Local, National Civic Organizations

\_\_\_\_\_ Hours worked per week (after school)      \_\_\_\_\_ Hours worked per week (summer)

Athletics	Team, Club	Varsity	Junior Varsity	Team Captain
Baseball/Softball	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Basketball	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cheerleading	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Crew	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cross Country	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fencing	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Field Hockey	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Football	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gymnastics	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lacrosse	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Soccer	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Swimming	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tennis	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Track and Field	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Volleyball	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wrestling	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
_____	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
_____	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*You are encouraged to attach a resume including honors, awards, extracurricular activities, and/or any other information you feel is pertinent to your application.*



**IV. ESSAY**

A 250 word, typed essay stating the reason(s) you would like to attend a Service Academy.

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**V. CURRENT OFFER**

Are you in receipt of a Conditional Offer of Appointment (COA) from a Service Academy(ies)? If yes, include a copy of the Conditional Offer. If you receive a COA *after* you have submitted this application, please contact the Academy Coordinator.

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**VI. APPLICANT'S SIGNATURE**

I, the undersigned, declare that the information I have provided on this application is true and correct and complete to the best of my knowledge and belief. (Applicant signature required.)

Signature \_\_\_\_\_ Date \_\_\_\_\_

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**VII. REVIEW**

Review completeness of this package with your guidance counselor. Have your guidance counselor sign below and provide a business telephone number.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print \_\_\_\_\_

Phone \_\_\_\_\_

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