

## **Application for Nomination to the United States Service Academies**

**United States Senator Debbie Stabenow** For Classes Entering Summer, 2009

## Instructions

Please type or print neatly. Completed applications must be <u>received</u> in my Mid-Michigan office no later than October 24, 2008. Please <u>do not</u> send your application to my Washington, DC office.

Your application is considered complete when the application and the following written records are received in my office:

- A copy of your high school transcript, including your class rank
- A copy of your ACT or SAT scores. If both tests were taken, please submit both scores. The highest test score will be considered. Our ACT code number is 7144. Our SAT code number is 1658.
- A recent photograph of yourself
- A total of three (3) letters of recommendation. One letter must come from <u>each</u> of the following categories for your application to be complete:
  - 1) Teacher (can be either English, Math, or Science)
  - 2) Principal or Counselor
  - 3) Non-Relative (do not use teachers, principals, or counselors for this category)

## Application

| Name                      |                     |                         |             |
|---------------------------|---------------------|-------------------------|-------------|
| First                     | Middle (not i       | nitial) Las             | t           |
| Permanent Address         |                     | Current Address         |             |
| Number and Street         | Apt. Number         | Number and Street       | Apt. Number |
| City/State/ZIP            |                     | City/State/ZIP          |             |
| ()<br>Permanent Telephone |                     | ()<br>Current Telephone |             |
| E-mail Address            |                     |                         |             |
| Gender                    |                     | Male                    | Female      |
| Social Security Nu        | mber                |                         |             |
| Date of Birth             |                     |                         |             |
| Pre-candidate ques        | tionnaire sent to a | cademy? Yes             | No          |
| Date of Application       | n:                  |                         |             |

Applicant Name: \_\_\_\_\_

| 7.  | Are you a United States Citizen?  | Yes       | No        |  |  |
|-----|---|-----------|-----------|--|--|
|     | Are you a Legal Resident of Michigan  | n? Yes    | No        |  |  |
|     | County of Residence State (if not Michigan)   |           | lichigan) |  |  |
| 8.  | Age Height W  | eightlbs. |           |  |  |
| 9.  | Do you wear glasses?  | Yes       | No        |  |  |
|     | Do you wear contact lenses?   | Yes       | No        |  |  |
| 10. | Parents/Guardian Names  |           |           |  |  |
| 11. | High School   |           |           |  |  |
|     | Date of Graduation  | GPA       | _         |  |  |
| 12. | Academy Preference  |           |           |  |  |
|     | (Please number in order of preference only for the academies in which you are interested.<br>If you only have one choice, mark "only".) |           |           |  |  |
|     | U.S. Air Force AcademyU.S. Merchant Marine AcademyU.S. Military AcademyU.S. Naval Academy   |           |           |  |  |

13. Activities (i.e. student government, clubs, youth groups etc.):

## 14. Awards and/or Honors:

Applicant Name: \_\_\_\_

15. Sports:

16. Hobbies:

17. Briefly state your reasons for wanting to attend an Academy:

I affirm that all information contained in this application is accurate:

(Applicant Signature)

Send completed application to: Senator Debbie Stabenow • Academy Application • 221 W. Lake Lansing Rd, Suite 100 • East Lansing, MI 48823

If you have any questions, please contact my office at (517) 203-1760.