

U.S. Service Academy Nominations Form

Thank you for your interest in the U.S. Service Academies. Please complete the form below.

** indicates required information*

CONTACT INFORMATION

First Name*: _____

Middle Name: _____

Last Name*: _____

Date of Birth (MMDDYYYY): _____

Social Security Number: _____

Street Address: _____

City, State, & Zip Code*: _____, PR _____

Telephone No.*: _____

Gender*(*check one*): MALE FEMALE

U.S. Citizen*(*check one*): Yes No

If not, list your country of citizenship: _____

Parents/Guardians: _____

EDUCATION INFORMATION

Name of High School*: _____

High School Street Address: _____

City, State, & Zip Code*: _____, PR _____

GPA*: _____

Class Size/Rank*: _____ / _____

Graduation Date* (MMDDYYYY): _____

TEST SCORES

SAT Scores	_____
Math	_____
Writing	_____
Critical Reading	_____
Composite	_____

ACT Scores	_____
English	_____
Math	_____
Reading	_____
Science	_____
Composite	_____

ACADEMY INFORMATION

Number your preference (1 to 4) of academies — with 1 being your highest preference

- _____ U.S. Air Force Academy
- _____ U.S. Merchant Marine Academy
- _____ U.S. Military Academy (West Point)
- _____ U.S. Naval Academy

An appointment to the Service Academies is based on a desire by the candidate to devote a lifetime of military service and implies recognition by the appointee of an obligation to the government to devote him / herself to a military career.

Are you interested in an appointment on that basis? _____ Yes _____ No

ADDITIONAL INFORMATION

Name of hometown newspaper: _____

Is it okay to use your name in a press release after receiving a nomination or appointment? _____ Yes _____ No

NOTE: Please include a list of your extra curricular activities and leadership responsibilities.

SIGNATURE: _____ **DATE:** _____

Please print and sign this form and fax it to our office to (202) 225-2154.