

# Congressman Dan Boren Service Academy Application

## Cover Check Sheet

- \_\_\_\_\_ Completed Application
- \_\_\_\_\_ 2 Letters of Recommendations
- \_\_\_\_\_ 1 Service Academy Academic Recommendation Form
- \_\_\_\_\_ 1 Page personal statement outlining why you are interested in entering a service academy.
- \_\_\_\_\_ A recent photo of yourself.
- \_\_\_\_\_ 1 official copy of your high school transcript.
- \_\_\_\_\_ 1 official copy of your ACT or SAT scores, with the writing component.

All applications must be returned by the **October 5, 2012** deadline. All applicants meeting eligibility requirements will be notified of the date, time, and place to report for a personal interview by a review panel.

The review panel will consist of three to five individuals, who are business and community leaders, service academy graduates, active military personnel and academia. Selections are made competitively on the basis of academic performances, leadership potential, personal statement, extra-curricular activities, personal interviews and letters of recommendations. The nominees for each vacancy will be recommended to Congressman Boren by the review panel. Congressman Boren will review and submit these recommendations to each service academy. The final ranking and subsequent appointments will be at the discretion of the academies.

### United States Service Academy Nominations 2012 Schedule

<b>Friday, October 5, 2012</b>	Deadline for file completion and submission of information
<b>Tuesday, October 23, 2012</b>	Personal Interview.
<b>Monday, October 29, 2012</b>	Nominee notification of status by mail begins.

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

Academy: \_\_\_\_\_

\*\*\* Mail with attention to Mary Bower

United States Congressman Dan Boren  
309 west 1st Street Claremore, OK 74017  
Phone: (918) 341-9336 Fax: (918) 342-4806

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

**Full Legal Name:** \_\_\_\_\_

**Social Security No.:** \_\_\_\_\_

(Check those in which you currently have or will have an open file. If you are interested in more than one academy, please rank them in order of importance.)

Air Force

Marine

Naval

Military

**Personal Information:**

Date of Birth: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Are you a U.S. Citizen? \_\_\_\_\_

**Mailing Address:**

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

**Legal Address in Oklahoma:**

(Check mark if it is the same address as above)

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

**Contact Information:**

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address \_\_\_\_\_

Preferred Method of Contact:

Home:

Cell:

E-Mail:

Guardian Name: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Guardian Name: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

**Academic Data:**

High School: \_\_\_\_\_

Graduation Date: \_\_\_\_\_

Counselor: \_\_\_\_\_

School Phone No.: \_\_\_\_\_

Does your classes include:

Honors

AP  
Classes

Other \_\_\_\_\_

(i.e. College  
classes)

GPA: \_\_\_\_\_

Class  
rank: \_\_\_\_\_

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

Extra Curricular Activities and Awards

Below, list your school and community activities. Complete form or attach your own typed information.

<b>Activity</b>	<b>Description of activity, accomplishments, offices held, awards, etc.</b>	<b>Year(s)</b>

Check here if you are attaching documents to support the above section. \_\_\_\_\_

I have read and fully understand the requirements and procedures for obtaining a nomination to the service academies by Congressman Boren, and do hereby apply for a nomination. I also understand the Academy Review Panel reserves the right to reject any application which contains inaccurate information.

**Signature:** \_\_\_\_\_

Have you applied with any other Congressional or Senate offices? If so with whom?

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Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# Service Academy Academic Recommendation Form

Please Type or Print the required information.

## School Counselor or Teacher

*Note: This recommendation form is completely confidential. After filling out the form, place in an envelope and seal. Sign your signature over the seal. You may mail it in to the given address at the bottom or give it directly to the student to hand in with his or her application.*

Name of Applicant: \_\_\_\_\_ Your Name: \_\_\_\_\_

Year in school: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Please rate applicant's abilities:	Excellent	Good	Fair	Poor
Leadership Characteristics				
Personality Traits				
Ability to get along with and work well with others				
Ability to work under pressure				
Ability to take criticism				
Attendance, punctuality and dependability				
Overall assessment of candidate				

Do you feel your student is a good applicant to the service academy? Why or why not? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Additional Academic Criteria  
(mark all that apply):

Honors \_\_\_\_\_ AP Classes \_\_\_\_\_ Other \_\_\_\_\_

General comments about student:

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

Title: \_\_\_\_\_ School: \_\_\_\_\_