

APPLICATION FOR NOMINATION TO U.S. SERVICE ACADEMIES
CONGRESSMAN JOHN KLINE – MINNESOTA SECOND CONGRESSIONAL DISTRICT

Top Choice	Second Choice	Third Choice	Fourth Choice

Full Name: _____

Last Name
First Name
Middle Name

Legal Minnesota Address

Street Address

City, State Zip

Temporary Address
(If different than legal Minnesota address)

Street Address

City, State Zip

Phone: _____ Email: _____ Congressional District: _____

Personal Information

Date of Birth: _____ Place of Birth: _____

Height: _____ Weight: _____ Social Security Number: _____

Parental Information

Father's Name: _____ Father's Occupation: _____

Mother's Name: _____ Mother's Occupation: _____

Academic Information

High School: _____ Counselor: _____

Year of Graduation: _____ Counselor Phone: _____

Check one: I have taken the following tests on the dates indicated: ACT _____ SAT _____

I have not taken the required test, but plan to take the ACT/SAT on: _____

Have you taken any college courses? _____ If so where and when: _____

(In addition to high school transcripts, official transcripts for each college/university attended must be submitted.)

Extra-Curricular and Athletic Information

(Please check all that apply.)

- | | | | |
|---------------------------------|------------------------|----------------------------|-----------------------|
| Boys' State/Girls' State | Student Council Member | Officer, School Club | Church Club |
| Boys' Nation/ Girls' Nation | Boy Scout/Girl Scout | Community Award Recipient | Jr. ROTC |
| President of Student Government | Eagle Scout | National Honor Society | School Band/Orchestra |
| Other Student Government Office | Gold Award Recipient | Editor, School Publication | Chorus |
| President of Class | Language Club | Officer, Non-School Club | Debate Team |
| Other Class Office | Science Club | Key Club | Speech Team |

If you are employed, how many hours per week? _____ After School: _____ Summer: _____

(You may choose to attach an additional sheet further detailing your extra-curricular awards and activities.)

Sport	Grade(s)	Varsity?	Position	Captain?	Awards and Honors

Nomination Information:

I am also seeking nomination through: Senator Senator Vice President President (Eligibility requirements apply)

Have you previously sought nomination for a service academy? No Yes When: _____ Result: _____

Please read before signing: I have read the information sheet explaining Congressman Kline's nominating procedure and am familiar with the requirements. I certify that I am a legal resident of the State of Minnesota. If I have not submitted all necessary data by the designated deadline, I understand that I may not be given final consideration for a nomination.

Signature: _____ Date: _____