H.S. COUNSELOR OR PRINCIPAL RECOMMENDATION FORM

FORM MUST BE COMPLETED BY EITHER THE HIGH SCHOOL PRINCIPAL OR GUIDANCE COUNSELOR for the candidate for Congressional Nomination to one of the United States Military Service Academies. This form is to be returned directly by the Principal or Counselor to:

THE OFFICE OF CONGRESSWOMAN LOIS CAPPS ATTN: GREG HAAS

1411 MARSH STREET – SUITE 2015, SAN LUIS OBISPO, CA 93401.

This form must be received by Wednesday, October 5, 2016.

NAME OF APPLICANT:			
First NAME OF SCHOOL:	Middle	Last	
ADDRESS OF SCHOOL:			
TELEPHONE NUMBER (OF SCHOOL:		
APPLICANT'S YEAR IN LEADERSHIP CHARACT	SCHOOL:	_CLASS RANK:(Please no percentile rankings)	GPA:
PERSONALITY TRAITS:			
ABILITY TO WORK UNI	DER PRESSURE:		
ABILITY TO GET ALON	G WITH OTHERS:		
GENERAL COMMENTS	and/or RECOMMEN	DATION:	
SIGNATURE:		DATE:	
TITLE:			