VIRGINIA FOXX 5TH DISTRICT, NORTH CAROLINA

COMMITTEE ON EDUCATION AND THE WORKFORCE CHAIRWOMAN

COMMITTEE ON OVERSIGHT AND GOVERNMENT REFORM MEMBER

WWW.FOXX.HOUSE.GOV

Congress of the United States House of Representatives

Washington, **DC** 20515-3305

U.S. Service Academy Nomination Application Checklist

Please make sure that all the required items listed below are sent to Congresswoman Foxx's Clemmons office and postmarked by <u>Thursday, November 1, 2018</u>. Incomplete applications will not be considered for nomination, so submit <u>ALL</u> your materials to ensure consideration for nomination. Please send all material though UPS, FedEx, or hand deliver to 3540 Clemmons Rd. Clemmons, NC 27012.

П	the responses. Include a 4 x 6 recent color photo, (Head and Shoulders photo preferred) and a copy of your Candidate Fitness Assessment scores. (Do Not Staple)
	Official High School Transcript. This should include your current coursework, your GPA through at least your junior year, and your class rank.
	Official SAT/ACT Scores. You may wish to send your scores directly to our office through the college boards. Please note that it can take 2-4 weeks for the scores to arrive at our office, so plan your test date(s) accordingly. Congresswoman Foxx's Score Codes are: SAT: 7424, ACT: 7583.
	Personal Essays. This section of the application is a great place to demonstrate your strengths and character attributes to the Congresswoman and her panel of Service Academy Board members, with whom you may interview. Please use a separate, typed document to submit this part of the application.
	Resume. On a separate, single page, please describe any work or community volunteer experience, athletic participation, awards or commendations, and any other activities that you feel to be noteworthy.
	Recommendations . You are required to submit a minimum of 3 letters of recommendation. These letters may be written by counselors, teachers, religious leaders, coaches, or community leaders. The 3 recommendations must be sealed in an envelope with the recommender's signature over the flap. You may submit up to 2 more additional recommendations for a maximum total of 5.
	Official College Transcript (if applicable). This should include your courses currently in progress and your GPA.

Please send all of the required materials to:

U.S. Congresswoman Virginia Foxx Attn: Paul Jackson III 3540 Clemmons Rd. Suite 125 Clemmons, NC 27012

If you have any questions, please contact Congresswoman Foxx's Service Academy Coordinator
Paul Jackson III at 336-778-0211

or Paul Jackson2@mail.house.gov 3540 CLEMMONS ROAD, SUITE 125 CLEMMONS, NC 27012 2306 7370 0011

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Applicant Information Form

full Name:						
(Last)		(First)		(Middle)	(Preferred Name)	
ome Address:		A				
	(Street/	P.O. Box)				
					i.	
	(City)			(State)	(Zip)	
lome Phone Number:		Alternate Phone Number:				
mail Address:				(ft.)		
Gender: □ Male □ Fe	emale			Are you a US Cit	izen?	
Social Security Number:			_	Date of Birth:		
lame of parent(s) or g	uardian(s):_			# 		
Are you the dependent	of an active	or retired memb	er of the U	Inited States Milita	ary?	
Are you currently enlist	ted in the U	nited States Milita	ry?		·	
f you answered yes to	the questio	n above, please lis	t your bra	nch of service:		
High School :				¥		
,		Name)	<u>.</u>			
	(School	Street Address)		(City)	(State)	(Zip)
	(School	Phone Number)		(School	Counselor's Name))
Expected Date of Graduation:		GPA (on	a 4.0 scale):	Class rank:	/	
SAT Scores: Critical Rea	ading	Math	W	riting	Composite	
ACT Scores: English		/lath	3540 CLEMMONS	Science ROAD, SUITE 125	400 SHADOW	LINE DRIVE, SUIT

202-225-2071

336-778-0211

828-265-0240

Applicant Information Form

Have you ever been charged with or convicted of a felony? Yes No If yes, explain in detail on a separate sheet.							
Are you being recruited by a service academy for athletics? If yes, list the academy and sport.							
Have you attended an Academy Summer Leadership Seminar? Yes No If yes which session(s) did you attend?							
Do you have any medical problems that you are currently being treated for? Yes No If yes explain							
Are you currently on any prescribed medications? Yes No If yes explain							
Is your eyesight 20 / 20 uncorrected? Yes No							
If not, what is your eyesight uncorrected?							
Right Eye/ Left Eye/							
Do your eyes correct to 20 / 20 with contacts or glasses? Yes No N/A							
Are you color blind? Yes No							
Please indicate which service academy you would like to attend. If you are interested in multiple academies, please rank your interest from 1 to 5, with 1 being your first choice and 5 being your last:							
U.S. Military Academy U.S. Naval Academy							
U.S. Air Force Academy U.S. Merchant Marine Academy							
U.S. Coast Guard Academy (please note: A Congressional nomination is NOT required for this academy)							
Please list other offices from which you plan to seek a nomination:							

Applicant Information Form

Application Agreement: Please read the statement below before signing and completing your application. Your signature at the bottom of this page indicates that you agree with this statement. If your signature is not included below, your application will be considered incomplete and you will therefore not be considered for a nomination.

I certify that, to the best of my knowledge, the information I have provided in my application is accurate. I understand that all of the required application materials must be submitted to Congresswoman Foxx's Clemmons Office and that those materials must be postmarked by November 1, 2018, and any failure on my part to do so will render my application incomplete. I understand that attending a service academy requires that I complete a minimum of 5 years of military service after my graduation, and I am prepared to complete that requirement. I certify that I am a U.S. Citizen, or that I will be a U.S. Citizen by July 1, 2018. I am a legal resident of the State of North Carolina. I will be between the ages of 17 and 23 years old on July 1, 2018. I am not married. I am not pregnant. I do not have any child support obligations.

Signature:	Date:	
Printed Name:		
	requested information constitutes authorization for review , her staff, her Service Academy Review Board, the Acade	
Signature:	Date:	
Printed Name:		

Personal Essays

Please attach a separate, typed document with the answers to three of the five questions below. Please note the word limits to each question and keep to those limits. This section of the application is a great place to demonstrate your strengths and character attributes to the Congresswoman and to her panel of Service Academy Board members, with whom you will interview.

- 1. When did you first become interested in attending a service academy, and what sparked your interest? (500 words or less)
- 2. How have you been preparing for the academic, physical, and character-based challenges you will face if you attend a service academy? (500 words or less)
- 3. Describe a time in your life when you faced adversity and explain how you handled it. (500 words or less)
- 4. Describe an experience that demonstrates your ability to act as a leader. (500 words or less)
- 5. In a field of thousands of talented and driven students applying for service academies, what is unique about you and your experience that would make you a good candidate to attend a service academy? (500 words or less)