## **Application Request Form**

Ohio 15<sup>th</sup> Congressional District Residents Only \*This form must be submitted by FRIDAY, SEPTEMBER 18, 2020.

Date:				
Dear Congressman Stivers: I am interested in pursuing a nominan application be e-mailed to me so the Academy in the summer of 202	o that I may a			
Name				
Home Address				
City, State, Zip				
CountyH	untyHome Phone Number			
Email Address (Please list an email that is checked regularly. The appl	ications will I	oe also sent to th	is email address.)	
Date of Birth				
Name of Father			_	
Name of Mother			_	
High School		Graduation Date		
I have requested or intend to requested or service Academy Admissions Office		dmissions file be	initiated for me at the following	
	<u>Have</u>	<u>Intend to</u>	Not Interested	
U.S. Air Force Academy				
U.S. Naval Academy at Annapolis				
U.S. Merchant Marine Academy				
U.S. Military Academy at West Poir	nt 🗆			
I acknowledge that I am a resident	of Ohio's 15 <sup>t</sup>	h Congressional	District.	
Sincerely,				
(Please sign above)				

(Please sign above)

NOTE: After you have completed this form, please mail it to Congressman Steve Stivers, 104 E. Main Street, Lancaster, Ohio 43130 or fax it to (614) 771-3990. Application packets will be sent via e-mail to the email address listed on this form.