

PERSONAL INFORMATION

Name:	
(FIRST, MIDDLE, LAST	r)
PREFERRED NAME (IF DIFFEREN	IT THAN ABOVE):
SEX:	DATE OF BIRTH:
SOCIAL SECURITY NUMBER:	
NINTH DISTRICT ADDRESS:	
CITY, STATE, ZIP:	
COUNTY:	· · · · · · · · · · · · · · · · · · ·
HOME TELEPHONE:	
CELL PHONE:	
EMAIL ADDRESS:	· · · · · · · · · · · · · · · · · · ·
MOTHER'S NAME:	
Address (if different):	
FATHER'S NAME:	
Address (if different):	

HIGH SCHOOL INFORMATION		
Name of High School:		
COUNTY:		
Address:		
CITY, STATE, ZIP:		
DATE OF GRADUATION:		
GPA/SCALE: CLASS STANDING: OF		
COLLEGE INFORMATION (IF APPLICABLE)		
Name of College:		
Address:		
CITY, STATE, ZIP:		
Major:		
GPA/SCALE: CREDIT HOURS:		
DATE OF GRADUATION:		
COLLEGE ENTRANCE EXAMINATIONS		
SAT Scores:		
2 ND EXAM DATE & SCORE:		
3 RD EXAM DATE & SCORE:		
ACT Scores: 1 ST EXAM DATE & SCORE:		

2 ND EXAM DATE & SCORE:		
3RD EXAM DATE & SCORE:		
ACADEMY	PREFERENCE	
IF YOU DESIRE TO BE CONSIDERED FOR NOMINATION TO ONE OR MORE OF THE ACADEMIES LISTED		
BELOW, PLEASE INDICATE YOUR CHOICE NUMERICALLY FROM 1 TO 4. USE N/A IF YOU ARE NOT		
INTERESTED IN A PARTICULAR ACADEMY. CIRC	CLE Y FOR YES AND N FOR NO IF YOU HAVE STARTED	
A PRELIMINARY APPLICATION TO THAT ACADEM	ny.	
AIR FORCE	MILITARY	
Y N	YN	
MERCHANT MARINE	NAVAL	
Y N	Y N	
***THE U.S. COAST GUARD ACADEMY DOES NOT REQUIRE A CONGRESSIONAL NOMINATION.		
OTHER NOMIN	NATING SOURCES	
ARE YOU ELIGIBLE FOR A PRESIDENTIAL NOMINATION? Y N		
PLEASE CHECK ALL OTHER SERVICE ACADEMIES' NOMINATING SOURCES THAT YOU PLAN TO PURSUE:		
Presid	DENT JOSEPH BIDEN	
VICE PRESIDENT KAMALA H	IARRISSENATOR TIM KAINE	
SENATOR MARK WARNER	JROTC	

ACKNOWLEDGEMENT: I REQUEST THAT CONGRESSMAN GRIFFITH CONSIDER MY APPLICATION FOR A CONGRESSIONAL NOMINATION TO THE UNITED STATES SERVICE ACADEMY OR ACADEMIES THAT I HAVE LISTED. I AFFIRM THAT I HAVE NEVER BEEN CONVICTED OR ARRESTED FOR VIOLATING A STATE OR FEDERAL STATUTE. I UNDERSTAND THAT THE DEADLINE FOR APPLICATIONS TO BE RECEIVED IN THE OFFICE IS OCTOBER 15. IF I HAVE NOT SUBMITTED ALL OF THE REQUESTED INFORMATION BY THAT DEADLINE, I UNDERSTAND THAT MY APPLICATION MAY NOT BE GIVEN FULL CONSIDERATION. I, THE UNDERSIGNED, DECLARE THAT THE INFORMATION I HAVE PROVIDED ON THIS APPLICATION IS CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

CANDIDATE SIGNATURE:
DATE:
I APPROVE OF THIS APPLICATION AND UNDERSTAND THAT IF MY CHILD OR WARD IS NOMINATED TO A SERVICE ACADEMY, ANY ANNOUNCEMENT TO THE NEWS MEDIA WILL BE MADE BY CONGRESSMAN GRIFFITH'S OFFICE.
PARENTAL SIGNATURE:
DATE:
PROVISIONS OF THE PRIVACY ACT OF 1974 ARE WAIVED TO THE EXTENT OF

RETURN THIS COMPLETED APPLICATION TO OUR OFFICE BY OCTOBER 15.

1) CURRENT PHOTO

ALONG WITH:

- 2) HIGH SCHOOL TRANSCRIPT
- 3) ACT or SAT Results
- 4) RESUME OF ACTIVITIES
- 5) ESSAY—STATING WHY YOU WANT TO ATTEND A SERVICE ACADEMY
- 6) MINIMUM OF THREE (3) LETTERS OF RECOMMENDATION, <u>SEALED AND</u> SIGNED ACROSS THE SEAL BY AUTHOR OF LETTER

To: Office of Congressman H. Morgan Griffith Attn: Josh Hess 323 W. main St. Abingdon, Virginia 24210

SHARING THIS INFORMATION WITH SERVICE ACADEMIES.