

Heather Wilson

U.S. Congresswoman

Representing New Mexico's First District

Service Academy Nomination Application

Privacy Act Statement: The submission of the requested information constitutes authorization for review of this information by Representative Heather Wilson, her staff, her Service Academy Review Board, the Academy Admission Office, and the media.

Please print clearly or type the following information:

I. Applicant Information		
Last Name:	_First Name:	Middle Initial:
Suffix: Preferred Name/Ni		
Social Security Number:		·
Parent Address:		
City:Zip Cod		
Home Telephone Number:		cond Phone:
Temporary Address:	×	
City:Zip Cod		/
Gender: Male Female		
Race(Optional only for statistical p	outposes):	
White (Non-Hispanic or Latino)	Black or African Ame	erican (Non-Hispanic or Latino)
Asian	Native Hawaiian or (Other Pacific Islander
American Indian or Alaska Native	Hispanic or Latino	, , , , , , , , , , , , , , , , , , ,
Two or more races	Other:	
Date of Birth:	•	
Will you be 17 but not yet 23 years		year you are admitted?
[] Yes [] No		
Mother's Name:		· · · · · · · · · · · · · · · · · · ·
Father's Name:		

Legal Guardia	n (if applica	ble):					
Are you applyi	ng for a nor	nination from any	other source?] Yes	[] No
Whom?P	resident	Vice President	Sen. Domenici _	Sen	Bingama	m	-
Other_					_		
active duty military	y, retired milita	ry, or was killed in actio	all sources available to ye on, you may be eligible for tion Sheet for applicable	r a Presid	r father or m ential or Vic	other i e Presi -	s dential
Will you be a U	Jnited States	s' citizen at the tim	e of enrollment?	[] Yes]] No
Are you a resid	lent of the F	irst Congressional	District of New Me	xico? [] Yes	[] No
Have you appl	ied for a noi	nination in a previ	ous year?	Ĩ] Yes	[] No
II. Academy	Preferenc	es				,	
			der of preference fo		ance, with	one	being
Air For	ce	Army	Navy		Merchan	t Mar	ine
Have you been	contacted o	lirectly by an Acad	emy? [] Yes	·	1 No		·
					- F		
Have you ever	served in th	e military in any ca	pacity?				
f yes, what is t	the highest 1	ank you held?					
III. Academi	c Qualific	ations					
			Telephone Nuc	nhon			
			Telephone Nur	iiber			
				Gradi	iation Yea		,
Cest Scores:		Verbal		tu.	·	•	
		Math	•				
	<u>O</u>	_					
		English		Å,			
		Math				٠	
·	·	Reading					
		Science/Reasoning	₹ .				
	ACT :	Plus Writing	(required by	y USMA	r)		

High School Class Rank	Are you so	cheduled to re-tak	e any	of you	ır tests?		Date(s)	·
Grade Point Average (GPA): Grade Point Average, Scale, Class Rank and Size must be included on your high school transcript. Inhomit college entrance examination board scores — ACT and/ or SAT and High School/College transcripts. ICT/SAT scores reported on your official certified transcript are acceptable. College Attended (if applicable): Mailing Address: Major: Years Attended: Grade Point Average: dvanced Placement Courses Taken and AP Score: cademic Awards or Special Achievements: my additional explanations concerning your transcript or test scores you want the interview anel to know? W. Athletic Activities rades 9-12 and college (if applicable) Out Years in Sport Number of Years as Captain Years Receiving					out of _		_ class size.	
Grade Point Average (GPA): Grade Point Average, Scale, Class Rank and Size must be included on your high school transcript. Inhomit college entrance examination board scores — ACT and/ or SAT and High School/College transcripts. ICT/SAT scores reported on your official certified transcript are acceptable. College Attended (if applicable): Mailing Address: Major: Years Attended: Grade Point Average: dvanced Placement Courses Taken and AP Score: cademic Awards or Special Achievements: my additional explanations concerning your transcript or test scores you want the interview anel to know? W. Athletic Activities rades 9-12 and college (if applicable) Out Years in Sport Number of Years as Captain Years Receiving	Class Perc	centile: Top	1%	5%	10%	25%	50%	•
Additional explanations concerning your transcript or test scores you want the interview and to know? Note: A Activities reads 9-12 and college (if applicable) V. Athletic Activities reads 9-12 and college (if applicable) Vears in Sport Number of Years as Captain Years Receiving		~					•	-
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Mailing Address: Years Attended:								ool/College transcripts.
Mailing Address: Years Attended:	College At	ttended (if applica	ıble):_				:	
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V. Athletic Activities rades 9-12 and college (if applicable) Poort Years in Sport Number of Years as Captain Years Receiving								
Varsity Letters or Co-Captain Special Recognition	anel to kr	tic Activities and college (if applicat	ble)	Numbe	er of	Yea	rs as Captain	•
			$-\frac{\mathbf{v}}{\mathbf{v}}$	arsity	Letters	or C	Co-Captain	Special Recognition
	. ,				<u> </u>			

17.3 Academy Application Athletic Awards or Special Achievement: Have you been in contact with athletic coaches or staff at any Academy? [] Yes [] No If so: **Academy** Coach/Contact Name **Sport** Telephone Number V. Non-Athletic Activities Have you been: Number of years grades 9-12 Class President Class Officer **Student Body Officer** JROTC Detachment Commander **IROTC** Member Officer of a School Club **Boys/Girls State** Boys/Girls Nation **National Honor Society** Eagle Scout/Gold Award **Boy/Girl Scout Member** Civil Air Patrol Member Civil Air Patrol Detachment Officer 4-H/FFA Member 4-H/FFA Club Officer Other Officer Non-School Club **Editor School Publication** Drama/Speech/Debate Club Member **School Band/Chorus** List other non-athletic extracurricular activities and leadership positions:

5/11/07

Non-athletic awards or special achievements:

7. Prior Service			
V. Prior Service			
Have you had any	prior service w	rith the military?	
[] Yes: Active	Guard	Reserve []No	
Branch:	Years:	Highest	Rank:
)	
Has a parent, gran Name	idparent or sibl	ing attended a Service A Service Academy	Academy? Year of Graduation
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/II. Employme	nt History		
Reverse chronological or	der; use additional		
VII. Employme Reverse chronological or Place	•	sheets if necessary. Position	Hours per week worked
Reverse chronological or	der; use additional		Hours per week worked
Reverse chronological or	der; use additional		Hours per week worked
Reverse chronological or	der; use additional		Hours per week worked
Reverse chronological or	der; use additional		Hours per week worked
Reverse chronological or	der; use additional		Hours per week worked
Reverse chronological ord	Dates		Hours per week worked
Reverse chronological or	Dates		Hours per week worked

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5/11/07

IX. Privacy Statement

I have read the Privacy Act Statement. The information provided in this application is true and correct to the best of my knowledge. I understand that in addition to this application, I am also required to submit all of the items on the application check-list. I further understand that Representative Wilson's Albuquerque Office must be in receipt of all application materials no later than 5:00 p.m., September 15, 2008.

Signature:		Date:	
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Return your completed application to: Jan Duffield Service Academy Liaison Representative Heather Wilson 20 First Plaza NW, Suite 603 Albuquerque, NM 87102