



Representative Shelley Berkley

Application for Congressional Nomination
to the United States Service Academies

Attach a
picture
here

Full Name: _____

Telephone Number: (____) _____ Social Security Number: _____

Permanent Address: _____

City: _____ State: _____ Zip: _____

Mailing Address (if different from above):

City: _____ State: _____ Zip: _____

Date of Birth: _____ Place of Birth (City/County/State): _____

High School _____ Graduation Date _____

Address of High School _____

Father's Name _____ Mother's Name _____

Parent's Address (if different from above) _____

Grade Point Average _____ Class Rank ____ of _____

Test Scores:

SAT Verbal _____ SAT Math _____ ACT English _____ ACT Math _____

ACT Reading _____ ACT Sci. Reasoning _____ ACT Composite _____

Academy Selection: ' Air Force ' Naval

(Number in order of preference) ' Merchant Marines ' Military

I am also seeking a nomination through:

_____ (Senator, Vice President, President, etc.)

Please explain why you wish to attend a United States Service Academy
(Use additional sheet if necessary)

I verify that I am a legal resident of Nevada's First Congressional District

Signature _____ Date _____

Please return this application to
Representative Shelley Berkley
2340 Paseo Del Prado, Ste. D-106
Las Vegas, NV 89102