

**Congressman Wm. Lacy Clay
1st District – Missouri**

Application for Nomination to U.S. Service Academies

Personal Information:

Full Name (Last, First, Middle): _____

Social Security Number: ____ - ____ - ____ Date of Birth: ____ / ____ / ____

Address in the 4th District: _____

City: _____ County: _____ Zip: _____

Mailing Address (if different): _____

Name of Parent(s) of Guardian(s):

Name: _____ Work Phone: _____

Name: _____ Work Phone: _____

School Information:

High School Attended: _____

City: _____ Phone: _____

Class Rank: _____ out of _____ GPA: _____ Graduation Year: _____

ACT: _____ (M) _____ (V) _____

SAT: _____ (M) _____ (V) _____

High School or College Sports:

Other Extra Curricular Activities:

Service Academy:

Rank the following in order of preference (1-4, 1 being your first choice)

_____ **Army** (West Point, NY)

_____ **Navy** (Annapolis, MD)

_____ **Air Force** (Colorado Springs, CO)

_____ **Merchant Marine** (Kingsport, NY)

Have you already contacted Senator Carnahan or Senator Bond? Yes No

If you are a resident of St. Louis **City**, please mail this form along with the items from the academy checklist to:

Congressman William Lacy Clay
ATTN: Service Academy Coordinator
625 North Euclid Street, Suite #220
St. Louis, MO 63108

(314) 367-1970
(314) 367-1341 FAX

If you reside in St. Louis **County**, please mail to:

Congressman William Lacy Clay
ATTN: Service Academy Coordinator
8525 Page Boulevard
St. Louis, MO 63114

(314) 890-0349
(314) 427-6320 FAX